



Y-Judes

60 Cooper Road
BIRRRONG NSW 2143
Ph 02 9644 3195
Fax 02 9786 5989

Measurement Form

Date _____

Name _____

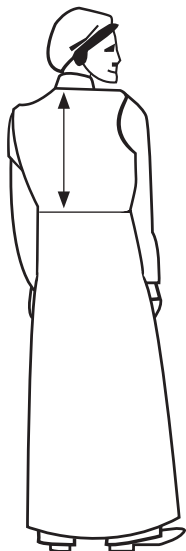
Address _____

Contact Number _____

Garment Type _____

Customers Height _____

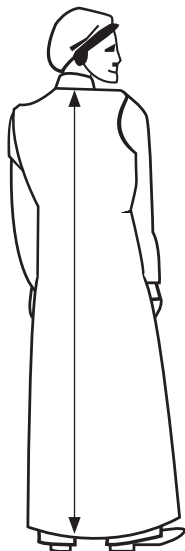
Customers Neck Size _____



From Bottom Collar Seam
To Waist

CM _____
or

INCHES _____



From Bottom Collar Seam
To Required Length

CM _____
or

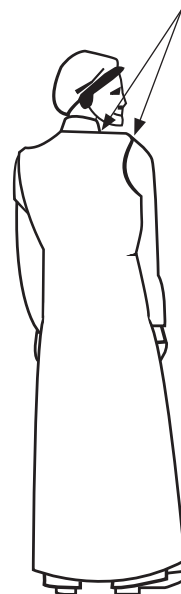
INCHES _____



From Centre Back
To Sleeve Seam

CM _____
or

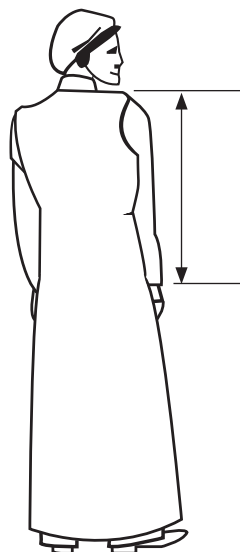
INCHES _____



From Collar Seam
To Sleeve Seam

CM _____
or

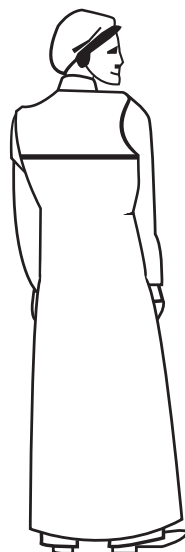
INCHES _____



From Sleeve Seam
Along outside arm to wrist

CM _____
or

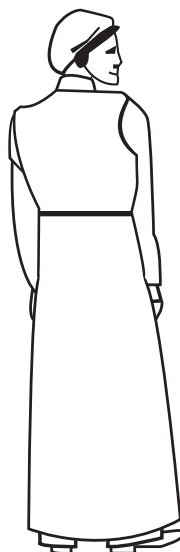
INCHES _____



Around Chest (Under
Jacket)

CM _____
or

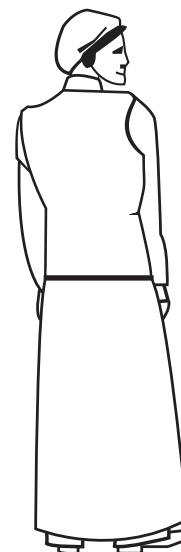
INCHES _____



Around Waist (under
Jacket)

CM _____
or

INCHES _____



Around hips

CM _____
or

INCHES _____