

# D & D Creations Measurement Form

Krewe \* \_\_\_\_\_ Name \* \_\_\_\_\_

Title \* \_\_\_\_\_ Home \* \_\_\_\_\_

Costume \_\_\_\_\_ Parents name: \* \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Cell \* \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

Neck \* \_\_\_\_\_ Collar \_\_\_\_\_

Shoulder \* \_\_\_\_\_ Head \_\_\_\_\_

Shoulder to Wrist \* \_\_\_\_\_ Height \* \_\_\_\_\_

Bust \* \_\_\_\_\_ Weight \* \_\_\_\_\_

Waist \* \_\_\_\_\_ Skullcap: Y/N Scheduled: Y/N Complete: Y/N

Hip \* \_\_\_\_\_ Slip: \_\_\_\_\_

Center Back Length \* \_\_\_\_\_

Arm Girth \* \_\_\_\_\_ Gloves: Y/N

Wrist Fist \* \_\_\_\_\_ Tight: Y/N

Waist to Floor \* \_\_\_\_\_ Shoe Size \* \_\_\_\_\_

Color Preference \_\_\_\_\_

Amount owed: \_\_\_\_\_  
Payment: \_\_\_\_\_ / \_\_\_\_\_  
Balance: \_\_\_\_\_ / \_\_\_\_\_  
Payment: \_\_\_\_\_ / \_\_\_\_\_  
Balance: \_\_\_\_\_ / \_\_\_\_\_  
Payment: \_\_\_\_\_ / \_\_\_\_\_  
Balance: \_\_\_\_\_ / \_\_\_\_\_

Phone Contact Times and Dates:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_