

UNIFORM REQUEST FORM

Request Date: _____

Order Date: _____

Delivery Date: _____

Order #: _____

*New Cadet only need to fill part 1 and part 2

PART 1: CONTACT INFORMATION							
Last Name			First Name			Rank	Gender: M F
Phone Number:				Email address:			
PART 2: MEASUREMENT							
1. Height		in	4. Neck		in	7. Hand	
2. Chest		in	5. Hip		in	8. Foot Length	mm
3. Waist		in	6. Head		in	9. Foot Width	mm
PART 3: UNIFORM PARTS REQUESTED (put a ✓ besides the request item)							
Tunic	Pants	Dress Shirt	Wedge	Belt	Toque	Gloves	Boots
Wool Socks	Tie	Parker	Badges	Slip-ons	FTU Coat	FTU Pants	FTU Boots
PART 4: (Office Use Only)							
Item	Size	In stock	Ordered	Old Parts returned		Date	
				Current size	✓/x		
1 Tunic							
2 Pants							
3 Dress Shirt							
4 Wedge							
5 Belt							
6 Boots							
7 Tie							
8 Wool Socks							
9 Squadron Badges							
10 Rank Slip-ons							
11 Toque							
12 Gloves							
13 Parker							
14 FTU Coat							
15 FTU Pants							
16 FTU Boots							
Total items ordered				Staff Initial			
PART 5: ACKNOWLEDGEMENT							
I acknowledge that I have received the uniform parts as requested above							
Signature: _____				Date: _____			