

# Measure A Shirt Request Form

Please print this form, fill it out, and include it with the shirt you send to be measured.

Mail your shirt to: Proper Cloth, Attn: Measuring, 495 Broadway, 6th Floor 10012.

NAME	DATE
EMAIL	RETURN SHIPPING ADDRESS
PHONE	
BRAND OF SHIRT BEING SENT	
SPECIAL INSTRUCTIONS OR NOTES	

## FOR PROPER CLOTH USE

COLLAR AROUND	SHOULDER/ARMPIT
SLEEVE LENGTH	FOREARM
YOKE WIDTH	REAR PLEATS
CHEST WIDTH	SHOULDER SLOPE
MIDSECTION WIDTH	NOTES
SHIRT LENGTH	
BOTTOM WIDTH	
SLEEVE WIDTH	
CUFF AROUND	
WATCH ALLOWANCE	