



DYNO™ ORDER FORM



PLEASE FILL OUT ALL OF THE FOLLOWING INFORMATION:

1 - Ask us what colors are available

BASIC BLACK, WITH CHOICE OF TRIM COLOR

ORDER DATE:



3 -AGE & FULL NAME OF CHILD:

AGE:

FULL NAME:

MORE INFORMATION, IF NEEDED

2 - MEASUREMENTS (TAKE MEASUREMENTS WHILE CHILD IS SITTING IN THE POSITION SHOWN)

| | | |
|------------------------|----|--|
| A - HIP TO TOP OF HEAD | CM | |
| B - HIP TO SHOULDER | CM | |
| C - HIP TO BEHIND KNEE | CM | |

| | | |
|---------------------|----|--|
| E - SEAT TO ARM PIT | CM | |
| D - CHEST WIDTH | CM | |
| F - HIP WIDTH | CM | |
| G - RIGHT LOWER LEG | CM | |
| H - LEFT LOWER LEG | CM | |

- 4 - STANDARD ACCESSORIES (INCLUDED)**
- DYNAMIC SEAT SYSTEM
 - ADJUSTABLE BACKREST HEIGHT
 - ADJUSTABLE SEAT DEPTH
 - ADJUSTABLE SEAT WIDTH
 - ADJUSTABLE FOOT REST HEIGHT
 - ADJUSTABLE HEIGHT PUSH BAR
 - CONFIGURABLE HEAD REST
 - QUICK-RELEASE REAR WHEELS
 - 4-POINT CHEST HARNESS
 - SEAT BELT
-
- 5 - OPTIONAL ACCESSORIES**
- HIP & TORSO SUPPORTS
 - THERAPEUTIC TABLE
 - GRAB BAR
 - SUNSHADE
 - LOWER STORAGE BAG

DISTRIBUTOR/RESPONSIBLE PARTY NAME, ADDRESS & PHONE NO:

AGE:
WEIGHT:
HEIGHT:
GENDER:

DIAGNOSIS:

SPECIAL NOTES: