

Seating Order Form



14 Dogwood Rd.
Mohrsville, PA 19541

Date Ordered _____ Needed _____ P.O.# _____

Company _____ Patient Name _____

Phone # _____ Ordered By _____ Chair Brand _____

Size of Chair : SA Adult NA Adult Youth X/LG Other _____

Material : Vinyl Darlexx Color _____

Hardware Furnished By : RDC Customer

Seat Information

Size: Depth _____ Width _____

Type Hardware: Drop Hook Quick Release Insert

Style: Plain Rolled Antithrust Wedged Amputee

Foam: Thickness _____ Kind _____ No Foam

Cut-Out Locations from Back Post: Left _____ Right _____

Hardware Type: _____ Hardware Quantity: _____

Back Information

Size: Height _____ Width _____

Type Hardware: Drop Hook Quick Release Insert

Style: Plain Curved Flexible Insert Channel NOTE: use channel diagram below when ordering this product

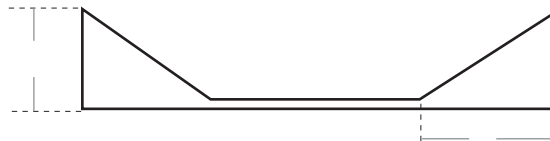
Foam: Thickness _____ Kind _____ No Foam

Hardware Type: _____ Hardware Quantity: _____

THIS PORTION IS ONLY TO BE USED WHEN ORDERING A CHANNEL BACK

Channel Back Seating Diagram

When ordering the channel back first mark the box in the seating information section; then use the diagram to show us the specific dimensions of the channel back.



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