

Custom Academic Regalia Purchase - Order Form

In Store Use Only : PO # _____ Date : _____

Name: _____

Email: _____ Phone _____

Degree: _____

University: _____

Location/City: _____

To be tailored for: Male ____ Female ____

Height: ____ ft ____ in Weight: _____ lbs

(Robe will be sized approximately 8" from floor.)

Chest Measurements: _____ in

Shirt Sleeve length: _____ in

(Measurements from center-back base of neck, over the top of the shoulder and along the outer arm to desired length.)

Neck Size: _____ in

Cap or Tam: _____ in

(Measure around the head approximately 1 inch above the brow, pulling the tape measure snugly.)

	PRICE	CHOOSE OPTION
PHD/DOCTOR Purchase		
Tam/Gown/Hood Bundle		
Gown Only		
Hood Only		
Tam Only		
Sub Total		
Tax		
Shipping and Handling	\$15.95	
Total Cost of Order		

Date needed: _____

Order Date: _____ Store Rep. _____

Signature _____

Payment Date: _____

Pick up date: _____

Signature _____

Ship To: _____

(Please allow 4 to 7 weeks for shipment.)