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Women's Submittal

Personal Information

Full Name:

Address:

Email:

Measurements

Vest/Jacket Measurements

VJ1	<input type="text"/>	VJ2	<input type="text"/>	VJ3	<input type="text"/>	VJ4	<input type="text"/>
VJ5	<input type="text"/>	VJ6	<input type="text"/>	VJ7	<input type="text"/>	VJ8	<input type="text"/>
VJ9	<input type="text"/>	VJ10	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Kilt Measurements

K1	<input type="text"/>	K2	<input type="text"/>	K3	<input type="text"/>
K4	<input type="text"/>				

Hose Measurements

H1	<input type="text"/>	H2	<input type="text"/>	H3	<input type="text"/>
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Height & Weight Measurements

Height	<input type="text"/>	Weight	<input type="text"/>
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