

Date Measured

COSTUME MEASUREMENT CHART

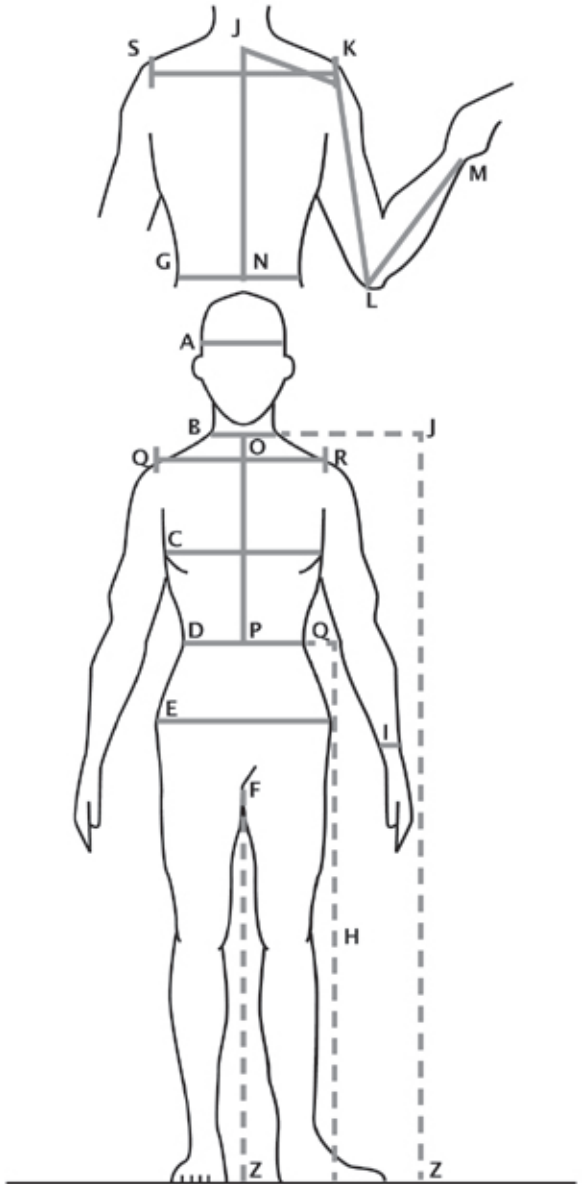
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Name: Last _____ First _____

Gender: Female Male

Height _____	Suit/Dress _____	Bra _____
Weight _____	Shirt _____	Hat _____
Shoe Size _____	Trouser _____	Allergies _____

- A _____ Head Circumference
- B _____ Base of Neck
- C _____ Full Chest
- _____ Ribcage/Underbust
- D _____ Waist
- _____ High Hips
- E _____ Fullest Hips/Low Hip at ____" below waist
- F-Z _____ Inseam
- G-H _____ Outseam to Below Knee
- G-Z _____ Outseam to Floor
- _____ Biceps
- _____ Thigh
- _____ Below Knee
- J-K _____ CB Nape to Shoulder
- K-L-M _____ Shoulder to Wrist (elbow bent)
- Q-R _____ Shoulder to Shoulder Front
- S-K _____ Shoulder to Shoulder Back
- O-P _____ Front Nape to Waist
- O-Z _____ Front Nape to Floor
- J-N _____ Back Nape to Waist
- J-Z _____ Back Nape to Floor



Notes

Measurements taken by

* This form should be filled out by a professional trained in taking proper measurements.