



# BOARD ORDER FORM

START DATE: \_\_\_\_\_  
 DUE DATE: \_\_\_\_\_

SHAPING LESSON / GLASSING LESSON / CUSTOM

NAME: \_\_\_\_\_  
 PHONE: \_\_\_\_\_  
 E-MAIL: \_\_\_\_\_

MODEL/TYPE: \_\_\_\_\_  
 DIMENSIONS: \_\_\_\_\_  
 VOLUME: \_\_\_\_\_  
 CONCAVES: \_\_\_\_\_  
 RAIL STYLE: \_\_\_\_\_

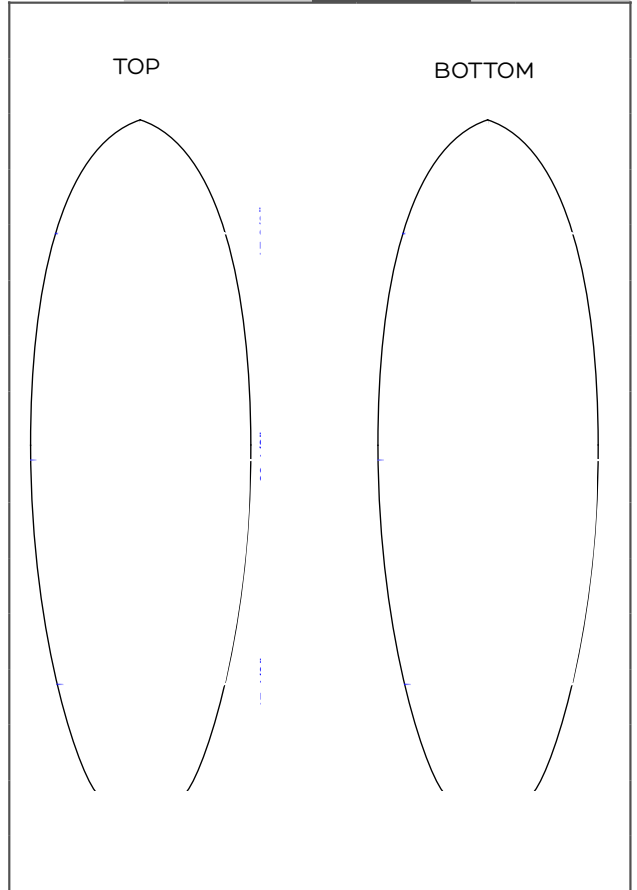
FIN SET-UP: SINGLE / 2+1 / TWIN / TRI / QUAD / 5-FIN  
 FINS CONT: FUTURES / FCS II / BOHNE / GLASS-ON

GLASS BTM: \_\_\_\_\_  
 GLASS TOP: \_\_\_\_\_

COLOR: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 LOGOS: \_\_\_\_\_  
 \_\_\_\_\_

NOTES: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

FINISH: SANDED / TOOLED POLISH / GLOSS POLISH



### PAY SCHEDULE

	AMT PAID	DATE PAID
DEPOSIT		
FINAL PMT		
PAYROLL 1		
PAYROLL 2		

PLEASE RETURN COMPLETED FORM TO [NICK@MARSURFEXCHANGE.COM](mailto:NICK@MARSURFEXCHANGE.COM)