

Order Form SOLO CHILD & YOUTH PRE-MOLDED ORTHOTIC

	ND ▶	∐ S	OLO Bo	xes	L	US N	/Iail La	bels	(Qty !	5)		UPS Labels (Qty 5) (Additional charges will apply)
P.O.#												Please apply barcode label here.
Patient First Name	\perp	\perp				_	_					Flease apply balcode label flere.
Patient Last Name												J
ender	Age			Weigh								SHIPPING Shipping Address: If different than billing address
noe Size ** (required)				Shoe	Style							ADDRESS
k											CITY STATE ZIP	
Physician's Signature (required)											- PAYMENT ▼ ☐ Check Enclosed CHECK#\$	
CHILD CIZE	٠											MC Visa Amex Credit Card on File BILL My SOLO Account
CHILD SIZES							_					CARD #
With Med. & Lat. Flanges			Add Gait Ext. to Promote:							_	NAME ON CARD EXP. DATE	
SIZE	QU	ANTIT	Y	I	N T	DE	\perp	С	UT	TOE		CITY STATE ZIP
C2												
C3/4											١	
C5/6												CHILD & YOUTH PRE-MOLDED ORTHOTICS
C7/8											╗	Child and Youth Pre-molded Orthotics. These orthotics provide
C9/10							\top				┪	the highest level of comfort and control to help growing feet
C11/12							\dashv				┪	develop a more accurate functioning position. The 3D-printed
C13							+				\dashv	shell is extremely durable.
CIS												
YOUTH SIZ	EC			1								Child Sizes incorporate medial and lateral flanges along with a
												deep heel cup to provide maximum control. Available in child
With M	Т											sizes only, gait extensions greatly reduce in toeing or out toeing
SIZE	Ql	JANTI	TY									which promotes correct foot function through the gait cycle.
Y1												
Y2												Youth sizes feature a slightly lower heel cup and medial flange
Y3												only. This promotes proper range of motion through the gait cyc
Y4												