

Supine Stander Measurements

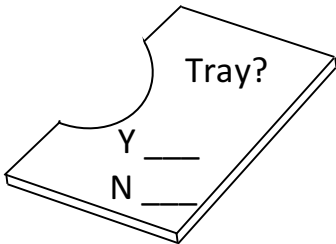
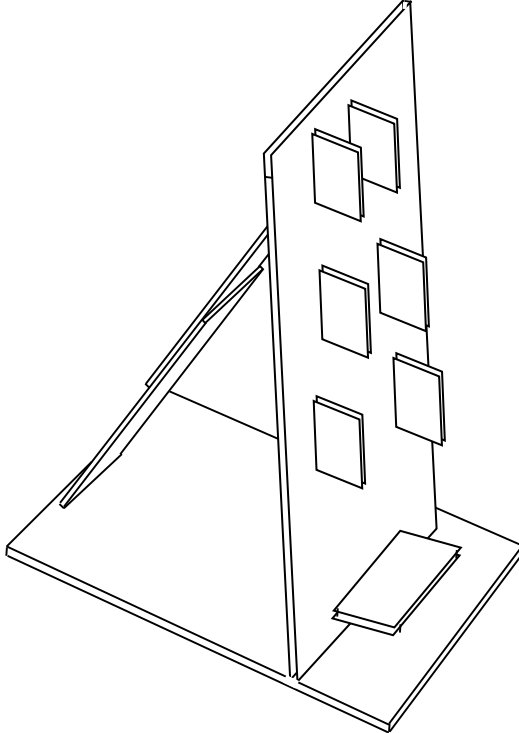
Special Needs Solutions (520) 838-0987 snsarizona@gmail.com

Person: _____
 Referred: _____
 Contact: _____
 Bill To: _____

Date: _____
 Invoice: _____

1" Padding: Color _____

unless specified otherwise:
 Lateral pads are 3" high x 4" deep.
 Padding behind back and legs.
 Straps at the Chest and Hips.



Leg Straps? _____

Foot Straps? Y _____ N _____

