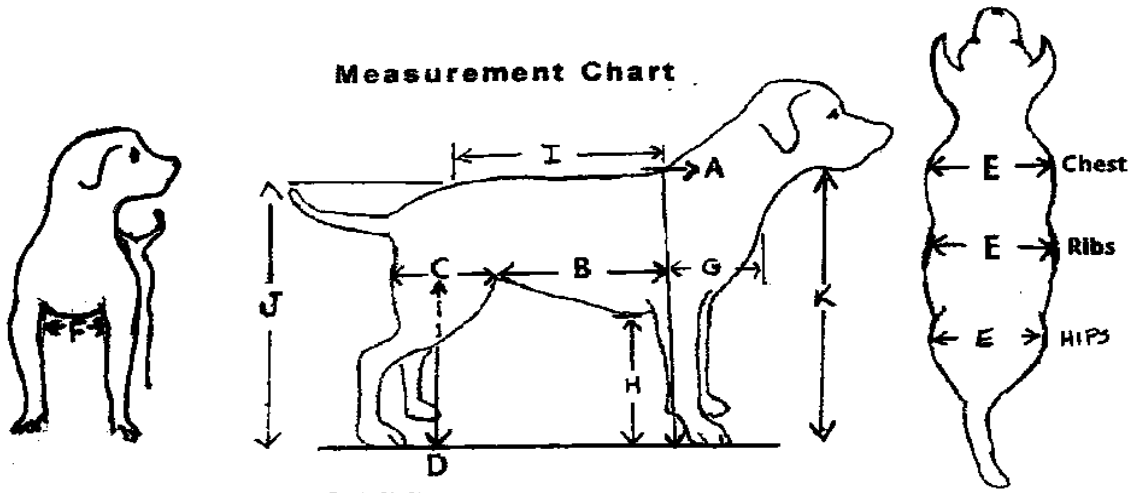


Date Ordered: _____
 Due Date: _____

Eddie's Wheels for Pets
 140 State Street
 Shelburne Falls, MA 01370
www.eddieswheels.com
 888-211-2700 toll free
 Fax: 413-625-8428

Name: _____ Phone: _____
 Address: _____ FAX: _____
 _____ Email: _____
 _____ Referred by: _____

Front Wheel Carts and Quad Carts



Dog's Name: _____ Breed: _____
 Weight: _____ Age: _____ M/F: _____ Spay/Neuter: _____
 Disability: _____
 Stirrups: _____ **Front Wheel or Quad Cart (Circle One)**

- | | |
|---|--|
| A- _____ height from floor to top of shoulder | F- _____ distance between front legs |
| B- _____ length from center of shoulder to front of thigh | G- _____ center of shoulder to point of chest |
| C- _____ widest part of thigh | H- _____ bottom of ribcage to floor |
| D- _____ height from ground to pelvic floor | I- _____ center of shoulder to center of thigh |
| E- _____ width at widest point | J- _____ height top of back above thigh |
| Shoulders: _____ Ribs: _____ Rump: _____ | K- _____ chin to floor |