

BOULDER NORDIC SPORT ORDER FORM

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBER(S): _____

E-MAIL _____

Credit Card #: _____ Expiration: ____/____

CVV: _____ Billing Zip Code: _____ Billing Address: _____

Skier Info: **Weight:** _____ **Height:** _____ **Age:** _____

Skier Comments (Skier Ability, Technical Proficiency, Strength, etc):

Boot Size: _____

Tech: **Classic** **Skate** **Ski Type:** _____

Brand: _____ **Model:** _____ **Length:** _____

NIS Plate or Flat (non-NIS) **Binding Style:** _____

Grind: _____ **Heat Box:** **NONE** **BASIC (\$19)** **EXTREME (\$29)**

Comments: