



REAR LEG DORSI FLEX ASSISTIVE DEVICE \$117.95 ea.

42580 Magellan Square • Ashburn VA 20148

Direct: 703-715-0333 Fax: 703-738-7434

Name: _____

Mailing Address: _____

City: _____

State/Country: _____

Zip/Postal Code: _____

Phone number: _____

E-mail: (for order confirmation) _____

Credit card #: _____

Expiration Date: _____ CVV(required): _____

Signature: _____

Dog's Name _____

Dog's Breed _____ Age _____

Diagnosis _____

Does dog have: _____ Cushing's Disease _____ Addison's Disease _____ Severe skin allergies

_____ Compromised auto-immune system _____ Long-term Prednisone therapy

MEASUREMENTS: INDICATE CENTIMETERS _____ OR INCHES _____

WHICH PAW: LEFT _____ RIGHT _____

#1 _____ Measure around your dog's leg, 2" above the Point of the Hock.

#2 _____ Measure from Point of Hock to Floor

#3 _____ Measure width of paw/paws

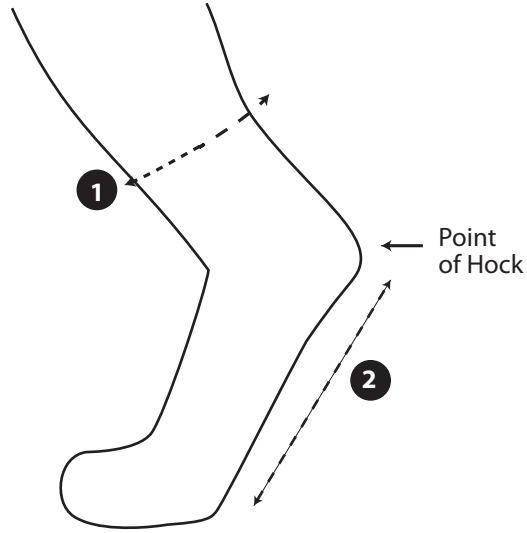
#4 _____ Measure length of paw front to back including nails

Standard Shipping: UPS Ground *within Continental United States. International orders ship US Postal Global Priority.*

Upon Request: _____ UPS Overnight _____ 2-Day _____ 3-Day

Measurement Instructions:

1. Measure around your dog's leg, 2" above Point of Hock
2. Measure from Point of Hock to floor



3. _____ Measure Width of Paw
4. _____ Measure Length of Paw Including nails

