

Ordered by: _____ Phone # (_____) _____

BILLING: P.O. Number _____ Townsend Account # _____

Bill To: _____

Ship To: _____

Address: _____

Address: _____

City: _____

City: _____

State: _____ Zip Code: _____ Country: _____

State: _____ Zip Code: _____ Country: _____

Phone: (_____) _____ Fax: (_____) _____

Phone: (_____) _____ Fax: (_____) _____

Shipping Preference: Ground 2-Day P.M. 2-Day A.M. Next Day P.M. Next Day A.M.

(If no preference is indicated, this order will be shipped 2 Day P.M.) Note: We do not ship products directly to patients.

Patient's Last Name: _____

Patient's First Name: _____

Metal Shell Walkers *(All Aluminum, No Plastic)*

Achilles Walker
(with Achilles angled heel wedge kit and adjustable sliding uprights)

Size/Quantity: S _____ M _____ L _____ XL _____

Achilles Walker With Air
(standard height with adjustable sliding uprights)

Size/Quantity: S _____ M _____ L _____ XL _____

Adjusta Walker
(mid calf height with adjustable sliding uprights)

Size/Quantity: S _____ M _____ L _____ XL _____

Adjusta Walker-Air
(standard height with pneumatic bootie and adjustable sliding uprights)

Size/Quantity: S _____ M _____ L _____ XL _____

Adjusta Walker-MC
(mid calf height with pneumatic bootie and adjustable sliding uprights)

Size/Quantity: S _____ M _____ L _____ XL _____

Plastic Shell Walkers *(With Aluminum Uprights)*

EZG8 *(standard height)*

Size/Quantity: XS _____ S _____ M _____ L _____ XL _____

EZG8-MC *(with shorter mid-calf struts)*

Size/Quantity: XS _____ S _____ M _____ L _____ XL _____

EZG8 *(with pneumatic bootie)*

Size/Quantity: XS _____ S _____ M _____ L _____ XL _____

EZG8-MC *(with pneumatic bootie)*

Size/Quantity: XS _____ S _____ M _____ L _____ XL _____

EZG8 ROM Walker *(with mid-calf struts and pneumatic bootie)*

Size/Quantity: XS _____ S _____ M _____ L _____ XL _____

EZG8 ROM AIR Walker *(with adjustable ROM hinges)*

Size/Quantity: S _____ M _____ L _____ XL _____

Plastic Full Shell Air Walker

XLR8 FH
(Full height with dual pneumatic bladders)

Size/Quantity: S _____ M _____ L _____ XL _____

XLR8 MC
(Mid calf boot with dual pneumatic bladders)

Size/Quantity: S _____ M _____ L _____ XL _____

Townsend PediWalker (Children's Sizes)

TD PediWalker *(with plastic shells and plastic struts)*

Size/Quantity: S _____ M _____ L _____

Please Indicate Accessories

EZG8 and XLR8 Wedge Kit* *(universal size)*
(angled heel wedge insert kit, for XLR8 and plastic shell walkers only)

Achilles Wedge Kit*
Size/Quantity: SM/MD _____ LG/XL _____

Indoor Walker Sole Cover* *(keeps floors/carpets clean)*
Quantity: _____

Size	Men's Shoe Size	Women's Shoe Size	Children Shoe Size
XS	2 – 4	3 1/2 – 5	
SM	4 – 7	5 – 8	5 – 8
MD	7 – 10	8 – 11	8 – 13
LG	10 – 13	11 – 15	13 – 3
XL	13 – 16	15+	

Please complete and fax this form to 800.798.2722 (24-hours a day). If you are calling in your order, this form indicates the options and information that will be required by our staff. For phone orders, please call 800.700.2722 between 6:00 a.m. and 4:00 p.m. (PST).

*Indicates additional charges apply