(Office use only)	Date Entered	
Customer #	Order #	
Check #	Entered by	
Check Amt.	Checked by	

Ship to address is a:

□ Business/School

Residence

A WISH COME TRUE® DANCE
2530 Pearl Buck Road, Bristol, PA 19007
FAX 800-755-9360 PHONE 800-755-2248
www.awishcometrue.com

CITY, STATE, ZIP



Check Amt						_ Checke	d by			www	ı.awis	hcon	netru	e.coi	m				(CON	ME'I	RUF			
		THIS SIDE OF FORM FIRST		СН	ILD SI	ZES		TOTAL	CHILD UNIT	TOTAL CHILD		ADUL1	SIZES		*Ca	EX	TEND eturned,	ED SIZ	ES d or cance	eled.	TOTAL ADULT	ADULT UNIT	TOTAL EXTEND- ED	EX- TENDED SIZE	TOTAL ADULT & Extended
STYLE#	CLR#	NAME OF COSTUME	XSC	SC	ISC	MC	IMC	QTY.	PRICE	PRICE	LC	SA	MA	LA	XLC	XXLC*	XLA	XXLA*	3XLA*	4XLA*	QTY.	PRICE	SIZE QTY.	UNIT PRICE	PRICE
All orders MUS	ST incl	ude minimum 50% o	deposi	it.		ı	I		ILD TAL												A	DULT &	SPECIAL Total +		
	BILLING	AND SHIPPING INFOR	MATION	N (PLE	ASE PRI	NT)			PA	YMENT INFO	RMATIO	N (PLE	ASE PR	INT) PL	EASE (CHECK A	LL BO	(ES TH	AT APP	LY.		CHII D.	TOTAL +		
CUSTOMER#: (A:	S PRINTED	ON BACK COVER OF PRICE B	оок)					_	FULL	Y PREPAID	ORDE	RS AR	E ELIG	IBLE	OR D	scou	NT								
REQUIRED DATE (ALLOW 10 TO 12 WE	E: EEKS FROM	THE TIME WE RECEIVE YOUR	R ORDER)					_		TIRE BALANC		-			()						TOT.	AL FROM	OTHER SIDE +		
P.O. #:	S ARE ACC	EPTED FROM COLLEGES, HIG	iH, AND M	MIDDLE SO	CHOOLS (ONLY.		_		ce Due and Po					RD							TOTAL C	RDER =		
		BILL T							 50% CHECK OR MO DEPOSIT ENCLOSED, WHEN ORDER IS COMPLETE: CHARGE CREDIT CARD FOR BALANCE 											DISCOUNT - (SEE DETAILS IN PRICE BOOK)					
School/Studio								-		□ WILL SE	ND CHE	CK FOR	BALAN	CE DUE	(2 WE	EKS TO (CLEAR)					PING (ta			
Address								-	□ CH	ARGE 50% DE						ER IS CC	MPLET	E:			011111				
		State		_ Zip)			_		□ CHARGE						EKS TO (CLEAR)					SUB	TOTAL =		
Cell phone #								_	□ BAC	K ORDER OK	п	SHIP C	OMPLET	LE ONL	Υ						6%	PA SALE			
Studio phone #_								-		NED PO (MUS		TACHE))			_	VISA	MasterCard D	SCOVER .	AMERICAN		PA RESI	DENTS ONLY		
Email								-		T CARD INFOR DIT CARD #	MAIION						VISA	MasterCard	NETWORK	DORRESS		GRAND	TOTAL =		
□ GO GREEN C	heck bo	for email confirmation a				aperles	s!		SEC	URITY CODE (PI	RINTED ON	BACK OF	CARD)	EXP	IRATION	DATE					DEPOSIT NO	50% DE			
Recipient Name_					-,								,								BAI	LANCE	DUE =		
Address								_		NATURE				NAN	IF ON CA	ARD.				_					

CREDIT CARD BILLING ADDRESS

AUTH. CODE (OFFICE USE ONLY)

PLEASE USE OTHER SIDE OF THE ORDER FORM FIRST			CHILD SIZES			TOTAL CHILD CHILD UNIT			ADULT SIZES			EXTENDED SIZES *Cannot be returned, exchanged or canceled.					TOTAL ADULT	ADULT UNIT	TOTAL EXTEND- ED	EX- TENDED SIZE	TOTAL ADULT & Extended				
STYLE#	CLR#	NAME OF COSTUME	XSC	SC	ISC	MC	IMC	QTY.	QTY. PRICE	PRICE	LC	SA	MA	LA	XLC	XXLC*	XLA	XXLA*	3XLA*	4XLA*	QTY.	PRICE	SIZE QTY.	UNIT PRICE	PRICE
											-														
											-														
															ADULT & SPECIAL										

	Girl Size Chart														
	XSC X-Small Child	SC Small Child	ISC Intermediate Small Child	MC Medium Child	IMC Intermediate Medium Child	LC Large Child	XLC X-Large Child	XXLC* XX-Large Child	SA Small Adult	MA Medium Adult	LA Large Adult	XLA X-Large Adult	XXLA* XX-Large Adult	3XLA* XXX-Large Adult	4XLA* XXXX-Large Adult
Girth	38-40	40-44	44-46	46-48	48-51	51-54	54-56	56-59	54-57	57–60	60-63	63-66	66-69	69–72	72–75
Bust	21–23	23–26	25-27	27–29	28–30	29-32	34–36	36–38	32–34	34-37	37–40	40-44	44-47	47–50	50-53
Waist	20-22	22-24	22–24	23-24	24-25	25–26	30-34	34-37	24-25	25-28	28-31	31–35	35–39	39-44	44-48
Hips	21–23	23–27	26-29	28-30	30-32	32–34	36–38	38-40	34–36	36-39	39-42	42-46	46-49	49-54	54-58
Inseam	16	19	22	23	25	27	27	27	29	30	31	32	32	32	32

	Guy Size Chart												
	XSC X-Small Child	SC Small Child	MC Medium Child	LC Large Child	SA Small Adult	MA Medium Adult	LA Large Adult	XLA X-Large Adult	XXLA* XX-Large Adult				
Girth	39-43	43-47	47–51	51–57	57–60	60-63	63–66	66-69	69–73				
Chest	21–23	23–26	26–29	29–34	34–37	37–40	40-44	44-47	47–50				
Waist	21–22	22–24	23–24	24–28	28-31	31–34	34–38	38-41	41-44				
Hips	21–23	23–28	28-30	30-34	34–37	37–40	40-44	44-47	47–50				
Inseam	18	21	25	29	32	34	35	36	36				

		ADULT & SPECIAL Total +							
		CHILD TOTAL +							
		S SIDE +	TAL THIS	TO					
FR SIDF	то отн	AMOUNT	ANSFER	TRA					



If faxing	this pg:			
Cust#				
Studio				_
Name		 		
Phone#_				

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Bristol, PA 19007
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