

***A Christmas Carol* COSTUME INFO**

NAME: _____

AGE: _____ GRADE: _____

NICKNAME: _____

CAREGIVER'S NAME: _____

GENDER PRONOUNS:
HE/SHE/THEY other option: _____

CAREGIVER'S EMAIL: _____

PLEASE FILL OUT ALL THAT APPLY AND INDICATE WHETHER **ADULT** OR **KID** SIZES:

HEIGHT: _____ WEIGHT: _____

PANTS SIZE: _____

DRESS SIZE: _____ BRA SIZE: _____

SUIT SIZE: _____

T-SHIRT SIZE: _____

DRESS SHIRT SIZE: _____

SHOE SIZE: _____

DO YOU WEAR CONTACTS? YES/ NO

DO YOU ONLY WEAR GLASSES? YES/ NO ****IF YES, WE WILL NEED A COPY OF YOUR PRESCRIPTION****

ANY ALLERGIES TO DETERGENTS? YES/NO

ANY ALLERGIES TO DEODORANTS? YES/NO

ANY ALLERGIES TO METALS? YES/NO

ANY ALLERGIES TO FABRICS? YES/NO

IF YES, PLEASE LIST WHICH: _____

ANY VISIBLE PIERCINGS? EARS/ LIST OTHER: _____

ARE YOU WILLING TO CHANGE YOUR HAIRSTYLE? YES/ NO

(FOR SHOP TO FILL OUT)

HEAD: _____ NECK: _____ SLEEVE LENGTH: _____

CHEST: _____ WAIST: _____ HIPS: _____

OUTSEAM: _____ WAIST TO BELOW KNEE: _____