

MALE - SIZING FORM



Armor Express • PO Box 516 • Central Lake, MI 49622 • Phone: (866) 357-3845 • Fax: (231) 544-6734

BODY ARMOR COORDINATORS NAME: _____
 BODY ARMOR COORDINATORS EMAIL: _____
 OFFICER'S FULL NAME: _____
 OFFICER/AGENT ID NUMBER: _____ DUTY STATION: _____
 GENDER: _____ ACADEMY CLASS: _____

SIZING INSTRUCTIONS - PLEASE READ CAREFULLY

1. ALWAYS TAKE MEASUREMENTS WITH A PARTNER. NEVER MEASURE YOURSELF.
2. **WEAR T-SHIRT, ON-DUTY UNDERGARMENT, AND DUTY GEAR WHEN BEING MEASURED.**
3. READ ALL INSTRUCTIONS CAREFULLY AND **COMPLETE ALL** REQUESTED INFORMATION.

HEIGHT: _____ feet _____ inches **WEIGHT:** _____ lbs.

1	CHEST (under arms)	_____	inches
2	WAIST/STOMACH (widest point)	_____	inches
3	FRONT STANDING (top of clavicle to top of duty belt)	_____	inches
4	FRONT SITTING (top of clavicle to top of duty belt)	_____	inches
5	BACK (top edge of t-shirt to top of duty belt)	_____	inches

