

# Children's Adaptive Clothing Custom Request Form

## Contact Information

Parent/Guardian Name

Child's Name

Email

Phone

## Child's Details

Child's Age

Gender

Disability/Condition (if relevant)

Size (provide measurements if possible)

## Clothing Details

Type of Clothing Requested

Specific Adaptations Needed (e.g., sensory-friendly, tube access, easy dressing, wheelchair-friendly, etc.)

Preferred Style, Colors, or Designs

Additional Notes or Requirements