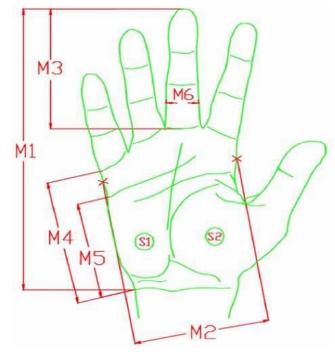
		CU	STOMIS	ED GR	IP INFO	ORMAT	TON SHEET		
				Person	al informa	ation			
Surname	e:			First name	:		Sex:	М	F
Date of b	oirth:			Address :					
City:				Postcode:		State :			
E-mail :			Tel:		Fax :				
				Тур	e of grip r	equired			
Open	Closed	Fixed	Adjustable		Standard I	hazelnut	Briar root		
				Technica	l informat	tion			
How ma	ny years hav	e you bee	n pistol shooti	ng:			Do you shoot competitively:	yes	no
On avera	age how ma	ny shots do	o you fire a ye	ar:		Do you train: yes			no
						If so how r	many times a week :		
In which	speciality ha	ave you acl	hieved your be	est results:					
Which st	andard grip	do you thir	nk is most suit	able for you	r hand:				
Does it h	elp to train y	our eyes -	sight - aim:					yes	no
If not wh	at errors do	you notice	and to what d	legree:					
When vo	ou shoot is yo	our arip :		Strong	Average	Light			

Hand:	Right	Left
Eye:	Right	Left



Hand measurements in "mm"				
Total hand length:	M1			
Hand width:	M2			
Length middle finger :	M3			
Length palm :	M4			
Length of palm from wrist to first crease :	M5			
Diameter of the first phalange of the middle finger:	M6			
Thickness of palm at point S1				
Thickness of palm at point S2				

Measurements to determine hand size					
Measure	from mm	to mm	description	cod.	
M2	75	81	junior/lady	D	
M2	82	87	small	S	
M2	88	93	medium	М	
M2	94	100	large	L	
M2	over	100	extra large	XL	

ATTACH IMAGE OF HAND WITH MEASUREMENTS

Would you say your hand is :	Slender	Normal	Large
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