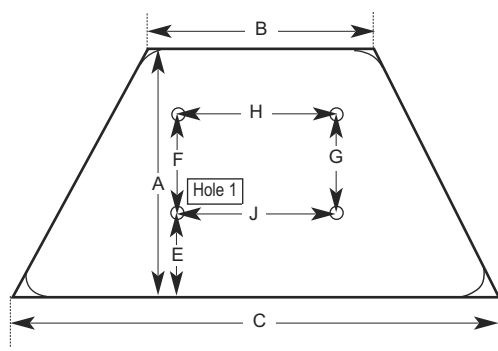
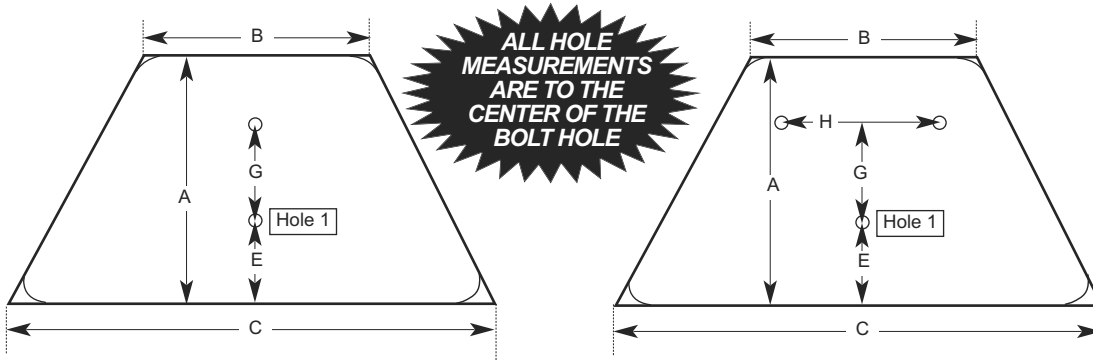


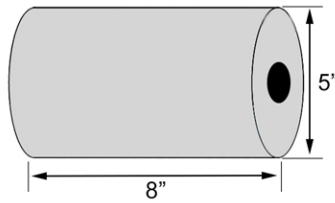
**HOW TO MEASURE:  
REMOVE PAD FROM MACHINE FOR  
ACCURATE HOLE PLACEMENT.**

- Once pad is removed identify top (head end) of plywood.
- All measurements are in inches

- A. Actual length of wood
- B. Width of wood at (head end)
- C. 2nd width of wood if different than B.
- D. Distance from edge to center of first hole (hole 1)
- E. Distance from adjacent edge to center of first hole.
- F. Distance between holes (center to center)
- G. Distance between holes (center to center)
- H. Distance between holes (center to center)
- J. Distance between holes (center to center)
- K. Foam size is 3/4", 1", 1-1/4", 1-1/2" and 2" . Do not include board thickness in your measurement. Standard plywood is 3/4"
- L. Specify bolt diameter. 1/4", 5/16", 3/8"

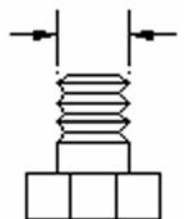


**ROLLER**



Remove roller from the machine to get an accurate length.  
 1. Length of roller - measure inner length.  
 2. Diameter of shaft roller rides on.  
 3. Outside diameter of roller.  
 Please measure and put dimensions on pad order sheet.

**BOLT DIAMETER**





# CUSTOM PAD ORDER SHEET

Club Name: ..... Phone Number: .....

Contact: ..... Fax Number: .....

Address ..... Email: .....

City, State, Zip: ..... Customer ID: .....

Using the instructions on the previous page, please measure the pad for which you need a replacement and draw a diagram with the measurements in the space provided. Please call with any questions: 1-800-875-7780.

Email completed form to [Brian@fullcirclepadding.com](mailto:Brian@fullcirclepadding.com) or fax to 508-285-2502.

Your diagram should have the measurements filled in like the samples below.

Manufacturer ..... Machine ..... Model # ..... Serial # .....

Pad Position ..... Shape of Pad .....  
(head, back, seat, chest, shoulder, elbow, arm, thigh, shin, ankle) (roller, square, half moon, rectangle, rectangle with angle sides)

Color: ..... Complete Pad  Wear Cover only

Your diagram should have the measurements filled in like the samples below.

Manufacturer ..... Machine ..... Model # ..... Serial # .....

Pad Position ..... Shape of Pad .....  
(head, back, seat, chest, shoulder, elbow, arm, thigh, shin, ankle) (roller, square, half moon, rectangle, rectangle with angle sides)

Color: ..... Complete Pad  Wear Cover only

**Fax your diagram to: 508-285-2502 or email: [brian@fullcirclepadding.com](mailto:brian@fullcirclepadding.com)**