



NJSAILS ORDER FORM

Please write in the box your information/required option, or circle the option you want.
Please use one form per suit of sails.

Your Name			
Class	DF 95	or	DF65
Your Sail Number			
Rig	DF95 A B C D	or	DF65 A+ A B C
Sail Film Type & Thickness	35 micron satin	50 micron satin	50 micron translucent
	35 micron frosted	50 micron frosted	
Corner Patch Primary Colour (see website for options)			
Corner Patch Secondary colour			
Jib Luff Type	Folded	Taped	
Jib Luff Colour (for taped jibs only)			
Batten Colour			
Sail Number (stencilled in black)	Yes	No	
Tell tales	Yes	No	
Twist stripes	Yes	No	
Customisation? (please describe or none)			
Delivery Address			
Email Address			
Mobile Phone Number			

Submit to: njsailsaus@gmail.com