



Tel 855-880-7463 | Fax 317-689-7712 | orders@irunners.com
www.irunners.com

I-Runner Custom Insole Order Form

Please ship custom impressions to:
I-Runner Custom Orthotic Lab
1007 Park Ave
Prospect, OH 43342

Company Name: _____
Ship-to address: _____

Fitter Name: _____
Phone # (if different) _____
Date: _____ PO: _____

Patient First Name	Patient Last Name	Shoe Size	Patient Weight (lbs)	Male <input type="checkbox"/>
_____	_____	_____	_____	Female <input type="checkbox"/>

Order Custom Insert and I-Runner Shoe
(use order form at bottom of page)

Order Custom Insert only

How Many Pair of Custom Insoles are you ordering?

1 Pair 2 Pair 3 Pair

Comments



Insole Type

- Bi-Laminate PlastaCell
- Tri-Laminate PlastaCell

Toe Filler

L5000

left right quantity

TMA Filler

L5000

left right quantity

Make Arch

- Like Cast (default)
- Lower Than Cast
- Higher Than Cast

Accommodations

Left		Right
<input type="checkbox"/> Met Pads		<input type="checkbox"/>
<input type="checkbox"/> Met Bars		<input type="checkbox"/>
<input type="checkbox"/> Met Trough		<input type="checkbox"/>



SHOE ORDER FORM

Check Style

- Maria
- Eliza
- Miya
- Sophia
- Pro Mesh
- Pro Leather

Size

- 6 6½ 7 7½ 8 8½
- 9 9½ 10 10½ 11

Width

- M W XW

Size

- Ross
- Lincoln
- Noble
- Chaplin
- Pro Mesh
- Pro Leather
- 7½ 8 8½ 9 9½ 10 10 ½
- 11 11 ½ 12 13 14 15

Width

- M W XW