

Custom Rx Swimming Goggle Form

Store Name: _____
 Account Number: _____
 Phone Number: _____
 Patient Reference: _____
 Date: _____

NOTE Please forward a copy of doctors prescription to claim tax exemption

	Sphere	Cylinder	Axis	Mono PD	Prism
OD					
OS					

PLEASE SELECT ONE OPTION



MOSI CUSTOM RX SWIMMING GOGGLES

POWER RANGE Sphere: -10.00 to +10.00 Cyl: -6.00
(Please Note Powers beyond -6.00 to +4.00 & Cyl: -2.00 must be surfaced)

Adult

SG946100 Black
 SG946101 Blue

Children (up to 7-8 yrs)

SG946201 Blue
 SG946202 Pink

PLEASE ACKNOWLEDGE

I acknowledge that the goggle is considered **Final Sale** once Rx lenses are mounted.
 There will be no return or exchanges.

This order will not proceed unless acknowledgement box is ticked.

ADDITIONAL NOTES