

LapTray Order Form

Rehab Design
Concepts 
14 Dogwood Road
Mohrsville, PA 19541

Date Ordered _____ Needed _____ P.O. # _____
Company _____ Patient Name _____
Phone # _____ Ordered By _____ Chair Brand _____

Standard Tray Information (for all trays)

Small _____ Junior _____ Medium _____ Large _____ X-Large _____ XX-Large _____
Chair: 11"-12" 13"-14" 15"-16" 17"-18" 19"-20" 21"-22"

1/4" Polycarbonate _____ 3/8" Polycarbonate _____ 3/8" Baltic Birch _____

Rim: Wood _____ Polycarbonate _____

Padding: Full Cover _____ Elbows _____

Attachment Method

Adjustable Toggle Clamps _____
Velcro _____
Slides _____

Adjustable Sport Clamp _____
Adjustable Quick-Cam Lock _____
Blank _____

Custom Measurements

Tray Dimensions

A _____

B _____

C _____

D _____

Control Box Cutout

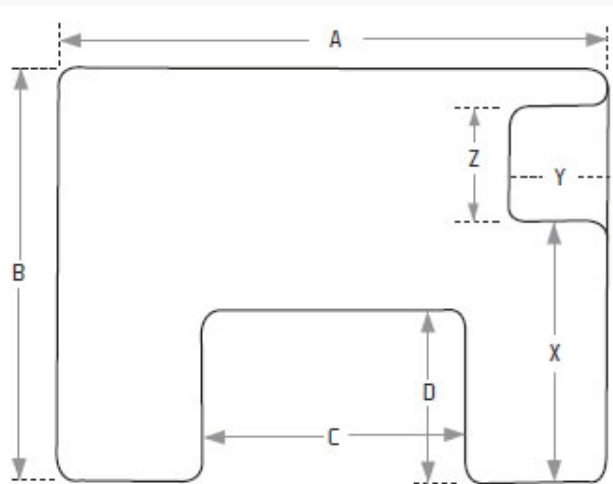
X _____

Y _____

Z _____

Left _____

Right _____



Very Important

We Need inside and outside measurements of arm rests

