

ORDER FORM - FLOCKING BIBS CFS 2024-2025

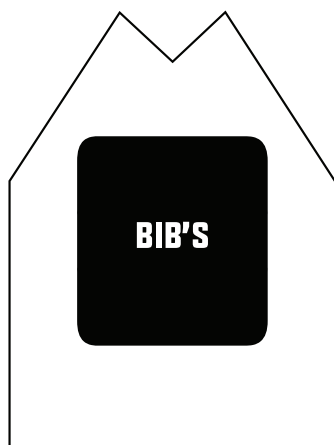


XTRECOM@HOTMAIL.FR
29 RUE EMILE DEWOITINE
02870 CREPY - FRANCE

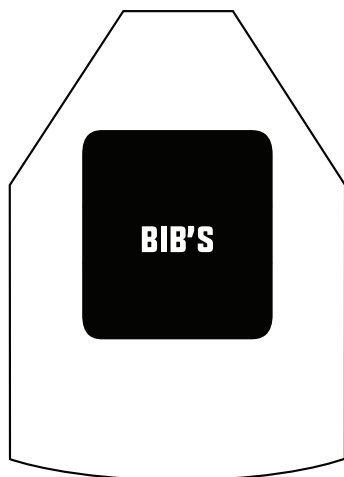
NAME:	PHONE:
ADDRESS:	EMAIL:
CITY:	COUNTRY:
POSTCODE:	

# ORDER	<input type="text"/>	RACE	<input type="text"/>	NUMBER	<input type="text"/>	CATEGORY	<input type="text"/>
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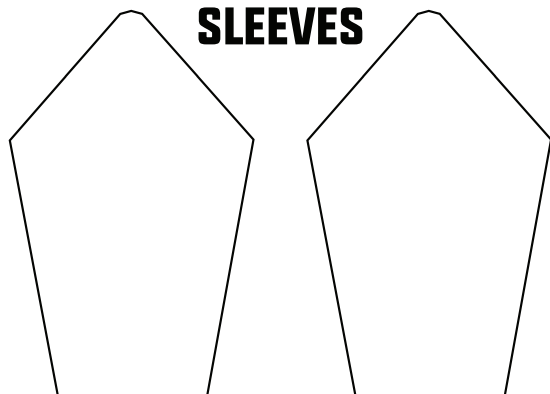
FRONT



BACK



SLEEVES



GAUCHE

DROITE