

About SitFit®

SitFit® is an exclusive Ergonomic Seating Fitment Programme from Sit Back & Relax. The SitFit® programme combines over 40 years of experience in ergonomic furniture design and was developed in conjunction with leading Physiotherapists and back care specialists. SitFit® utilises unique algorithmic formulas and "BodyMap" technology to provide our clients with the most accurate seating recommendation programme in Australia.

* Confidentiality - All information provided is kept strictly confidential

Client Details

Client Name: _____ Company: _____
 Position: _____ Work Application: _____
 Email: _____ Phone: _____
 Do you require a 3 Day Complimentary Trial Chair for assessment? Yes No
 Do You Require A Quotation? Yes No
 Send Quotation to Email Address Above: Yes OR Other Email: _____



Ergonomic Seating Fitment Programme

Please complete Section 1 (Option A OR Option B), Section 2 and Section 3 - Please tick appropriate boxes

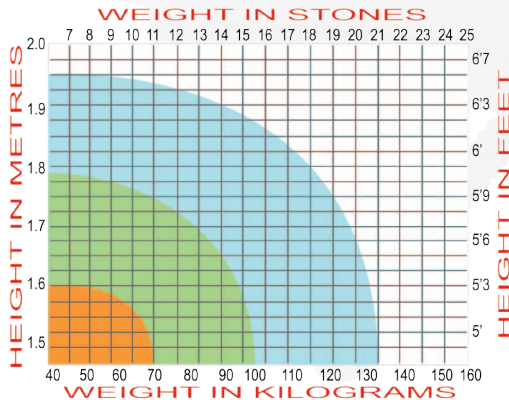


1. Option A - SitFit® Client Analysis

Let us provide you with the most accurate ergonomic seating recommendations available. Generated by our exclusive algorithmic body mapping programme, simply complete the Fitment Programme Analysis below and our Sitfit Seating Technicians will recommend the ergonomic chair/s to match your specifications exactly.

Client's Height: _____ cm
 Upper Leg Length (from back of buttocks to inside of knee joint to be measured when seated): _____ cm
 Body Mapping: Small Build Medium Build
 Large Build Extra Large Build

Please mark on the chart below with an X where your approximate height and weight converge.



Option B - Client Seating Preferences

Know exactly what style of chair you are looking for? Note your seating preferences below and our Sitfit Seating Technicians will recommend the ergonomic chair/s to suit.

Seat Length: Short Standard Long Extra Long
 Seat Width: Standard Wide Extra Wide
 Backrest Height: Medium High Extra High
 Backrest Lumbar Support: Small Medium Large
 Foam Composition: Pressure Relieving Dual Density Standard

2. Additional Required Information (for both Option A and Option B)

Seating

Adjustable Arms: Yes No
 Neck Support: Yes No
 Backrest Motion:
 Ergo Mechanism - Independently Adjustable Seat & Backrest / Lockable
 Synchron Mechanism- Synchronised Seat & Backrest / Lockable
 Either
 Pressure Points When Seated: (eg. Tingling/ Discomfort)
 Front Rear Sides

Desk Height

(Please measure from floor to top of desk) _____ cm

Injury / Medical Condition? (Any existing ailment that could affect your sitting posture or comfort) Details here.

3. Additional Equipment

Do you require accompanying Ergonomic Equipment?
 Footrest Monitor Arm Laptop Riser
 Ergonomic Mouse Mouse Pad Wrist Rest
 Document Holder Ergonomic Keyboard Forearm Support
 Laptop Case Chair Mat Telephone Headset

Do you require information on an ergonomic desk/workstation? Yes No

Other Notes: _____

Rehabilitation / OH&S / Health Professional Details (If Applicable)

Name _____
 Company _____ Phone _____
 Email _____

Please contact me directly regarding this referral: Yes No

