INFIELD

PRESCRIPTION SAFETY EYEWEAR | ORDER FORM

Delivery Address

Company
Name
Street / No.
Postal Code/Town
Country

Invoice Address

Customer ref.

Patient Details

Order date
Family name
First name
Patient number
Plant
Order number
Add. information

Additional Information

Customer ref.

Field reserved for INFIELD Safety

Safety Eyewear

Material	Type: Single Vision	Bifocal	Progressive	Office Monitor	Office 2m	Office Room	Office Deg.[2]	Coating: none	Hard coating	OSC	BPR	Optifog[3]	Anitfog[3]	SAR	Colour/Degression[2]: Brown	Grey
Poly	○	○	○	≠	≠	≠	≠	≠	○	○	≠	○	○	≠	○	○
1,6	○	○	○	○	○	○	○	≠	≠	○	○	○	≠	≠	○	○
1,5	○	○	○	○	○	○	○	○	≠	≠	≠	≠	≠	≠	≠	≠
1,67	○	≠	○	○	○	○	○	≠	≠	○	○	≠	≠	≠	≠	≠
Phototrop 1,6[1]	○	≠	○	≠	≠	≠	≠	≠	≠	○	≠	≠	≠	≠	○	○
Trivex	○	≠	○	≠	≠	≠	≠	≠	≠	○	≠	≠	≠	≠	≠	≠
Mineral	○	○	○	≠	≠	≠	≠	○	≠	≠	≠	≠	≠	○	≠	≠
Poly BT	○	○	○	≠	≠	≠	≠	≠	≠	≠	≠	○	○	≠	○	○

10/15/30/60/75/85 _____%

Degression 0,75-2,25dpt in 0,25 steps

_____dpt

Frame

○ INFIELD Frame

○ Other frame Model | Colour | Size

Accessories (standard case „Hardbox small“)

- ○ Belt case
- ○ Belt box
- ○ Spectacles cord
- ○ Spectacles safety cord
- ○ Sports head cord

Information

○	Please select/check!
≠	Combination not possible!
1	Select colour!
3	Optifog and Antifog only possible on single vision and progressive lenses!
HC	Hard coating
AF	Antifog
AF+HC	Antifog + hard coating
SAR	Super Antireflex
Optifog	HC + SAR + AF
OSC	HC + SAR + Clean coating
BPR	OSC + blue protect

Data for lenses

By ordering progressive, office or bifocal glasses please specify the data for far and near (or addition).

Data	Sphere	Cylinder	Axis	Prism	Basis	Far pupil distance
Far R						R: L:
Far L						Segment / Grinding height
Near R						R: L:
Near L						Addition:

○ Eye test

Notes

Service provider

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