REPAIR FORM - *Please complete a seperate form for each suit*

SUIT DETAILS

Repair reference number: _____
Please call us for one if you don't already have one

Drysuit make and model: _____
Please do not send us your drysuit bag

CONTACT DETAILS

Your Name: _____

Phone Number: _____ Mobile Number: _____

Email Address: _____

Billing Address

Address *Line 1* _____

Address *Line 2* _____

Town / City _____

County _____ Country _____ Post Code _____

Return Shipping Address

Address *Line 1* _____

Address *Line 2* _____

Town / City _____

County _____ Country _____ Post Code _____

REPAIR DETAILS - *Please tick all required repairs or services*

- ☐ Drysuit Service*
- ☐ P-Valve Service
- ☐ Re-seam Neck
- ☐ Re-seam Wrists
- ☐ Replace Zip
- ☐ Replace Neck Seal *Neoprene* • Neck measurement _____
- ☐ Replace Wrist Seals *Neoprene* • Wrist measurement _____
- ☐ Replace Boots • Boot size _____
- ☐ Tweak Neck • Neck measurement _____ How much to tweak _____
- ☐ Tweak Wrists • Wrist measurement _____ How much to tweak _____

**Drysuit service does not include valves.*

CHECK LIST - *BEFORE SENDING YOUR SUIT*

- ☐ Please remove any Heating Systems from your suit.
- ☐ Please make sure your suit is as clean as possible.
- ☐ Please do not send your Drysuit kit bag.

ADDITIONAL INFORMATION