



**Underwater Sports, Inc.**  
Technical Services Department

**(206) 362-3310**

Service@UnderwaterSports.com

Underwater Sports  
10545 Aurora Ave. North  
Seattle, WA 98133



Yes, please sign me up for our newsletter and special sales.

Please fill out this form **completely** - one for **each suit**.

**Company, Department, or Team Name, if applicable.**

**First Name**

**Last Name**

**Address 1**

**Address 2**

**City**

**State**

**Zip**

**Phone**

**Email Address**

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## Suit Information

**Dry Suit System Components** (Put N/A in non-applicable fields)

|              | Manufacturer         | Model                | SN #, Size           | Color/s              |
|--------------|----------------------|----------------------|----------------------|----------------------|
| Dry Suit     | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Undergarment | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Other        | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

**Purchased form** (store, city & state required if requesting warranty work)

**Date of Purchase** (Roughly)

**Purchase Price** (Roughly)

## Service Requested

Please check all that apply:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Airtest Suit                                   | <input type="checkbox"/> Overhaul Exhaust Valve                | <input type="checkbox"/> Overhaul Inflation Valve |
| <input type="checkbox"/> Overhaul Ankle Valves                          | <input type="checkbox"/> Patch Holes                           | <input type="checkbox"/> Replace Primary Zipper   |
| <input type="checkbox"/> Replace Relief Zipper                          | <input type="checkbox"/> Install Relief Zipper                 | <input type="checkbox"/> Replace RIGHT Wrist Seal |
| <input type="checkbox"/> Replace LEFT Wrist Seal                        | <input type="checkbox"/> Replace Neck Seal                     | <input type="checkbox"/> Replace RIGHT Ankle Seal |
| <input type="checkbox"/> Replace LEFT Ankle Seal                        | <input type="checkbox"/> Replace RIGHT Latex Sock              | <input type="checkbox"/> Replace LEFT Latex Sock  |
| <input type="checkbox"/> Replace Latex Hood                             | <input type="checkbox"/> Install Latex Hood                    | <input type="checkbox"/> Replace Latex Hood Purge |
| <input type="checkbox"/> Install Latex Hood Purge                       | <input type="checkbox"/> ReGlue Exhaust Port                   | <input type="checkbox"/> ReGlue Inflation Port    |
| <input type="checkbox"/> Install Suspenders                             | <input type="checkbox"/> Install Pee Valve (Specify Location)  |   |
| <input type="checkbox"/> Install Wrist Exhaust Valve (Specify Location) | <input type="checkbox"/> Install Zipper Pocket RIGHT Thigh     |   |
| <input type="checkbox"/> Install Zipper Pocket LEFT Thigh               | <input type="checkbox"/> Install Zipper Pocket w/ Sheath RIGHT |   |
| <input type="checkbox"/> Install Zipper Pocket w/ Sheath LEFT           | <input type="checkbox"/> Install Bellows Pocket RIGHT Thigh    |   |
| <input type="checkbox"/> Install Bellows Pocket LEFT Thigh              | <input type="checkbox"/> Replace Boots (Specify Size)          | <input type="checkbox"/> Other                    |

## Please describe symptoms, issues and other service/s requested:

Give specific locations for pockets, pee valves, wrist valves, etc.

### Verify, Print and Submit

*Thank you for trusting Underwater Sports for your service needs. Our certified technicians service your equipment following manufacturers specifications. The turn around time on every service varies. If this is a rush order, please let us know your needs and we will try and accommodate. We do offer special pricing for express service.*

*I understand that by submitting this form I am authorizing Underwater Sports, Inc. to perform all the work requested.*

**Electronic Verification**

**Full Name**

After filling out form, please email a copy to [Service@UnderwaterSports.com](mailto:Service@UnderwaterSports.com) and keep one for your records. We will email you confirmation so please add us to your approved senders. Please print a copy of the completed form and include it in the box with your Dry Suit.

**Please SUBMIT this form to  
[Service@UnderwaterSports.com](mailto:Service@UnderwaterSports.com)**

