

6315 Doyle Street, Emeryville, CA 94608

## **INSTRUCTIONS**

- 1. Write the flowlight colors of your wand in the correct order.
- → If you have a 5-light wand, write NONE in the top line.
- → If you have a flowlight-FS wand, write FS on one line.
- 2. If you have broken joint(s), CIRCLE it/them (in the picture) below.
- 3. You will be emailed & invoiced electronically once your order has been processed.

## **FLOWLIGHT WAND DETAILS**

12.5	
3 5-2	
A	
32	
125	

## WAND WARRANTY FORM

## CUSTOMER CONTACT

Name:	
Email:	
Phone: ————	
Shipping address:	
Please print clearly. If we can't identify your shipment.	t read your handwriting, we will set aside your return until you contact us
We will not share your contac and send you relevant payme	t information. This info is required for us to contact you about your returnent and tracking info.
<b>Need by date</b> (if relevan Rush fee may apply. You may	nt): be contacted by email with expedited shipping pricing.
PLEASE CHECK THE AF	PPROPRIATE BOX:
□ I would like a new rep $\rightarrow$ G2 flowlight wand:	In flowlight wand joint(s) fixed (\$20/joint + shipping). In flowlight wand joint(s) fixed (\$112-125/wand + shipping). Is will be replaced with flowlight-FS wands. Inge for a contact wand. (\$80 + shipping). Ingetfor wand.
	0 fee):
	(if purchased within 30 days)
	nge my flowlight wand for credit toward other flowtoys.
→ Please specify you	
, , ,	
	FOR OFFICIAL ELF USE
Received:	Shipped:
Contact notes:	
□ Check flowlights	Total # joints needing repair:
☐ Check finger loop	o. (If old/worn: free replacement)
<ul><li>□ Check finger loop</li><li>□ Check tube and c</li></ul>	aps.
<ul><li>□ Check finger loop</li><li>□ Check tube and c</li></ul>	