



REPAIR FORM

If you experience an issue with your Peak machine, please fill out this form, include proof of purchase, and send back to:

Peak/Holt, 7032 Foxton Way, Hanover, MD 21076

Name:	Email:	Phone:
Shop Name:	Country:	
Street Address:	State/Province:	
City/Suburb:	Zip Code:	

Name of Product:

Place of Purchase: _____ **Date of Purchase:** _____