

ATHLETIC EQUIPMENT

REPAIR FORM



MEMBER NAERA
National Athletic Equipment
Reconditioners Association

520 North Link Lane Fort Collins, CO 80524
970-482-1814

DATE	SALESMAN	RETURN DATE	#of Bags	AUTHORIZED SIGNATURE (CONTRACT AGREEMENT ON BACK SIDE)

SHIP TO: _____

CHARGE TO: _____

SCHOOL: _____ P.O. # _____

STREET: _____

CITY/STATE: _____ ZIP: _____

TERMS: NET 30 DAYS OR AS SPECIFIED

NOTICE: INVOICES NOT PAID AT MATURITY SUBJECT TO 1.5% INTEREST CHARGE PER MONTH!

QTY.	MFG.	MODEL	SHELL COLOR	MASK COLOR	COLOR CHANGE	JAWS		CHIN		MASK	
						IN	OUT	IN	OUT	IN	OUT

QTY.	HELMETS	UNIT	EXTEN.	QTY.		UNIT	EXTEN.
	GENERAL SERVICE				SHOULDER PADS		
	COMMENTS:				DUMMY REPAIR		
					PANTS REPAIR		
					JERSEY REPAIR		

HELMETS	<input type="checkbox"/> PAINT ALL HELMETS	FINISHED HELMET COLOR: _____	
	<input type="checkbox"/> BUFF AND POLISH ALL HELMETS	FINISHED HELMET COLOR: _____	
FACE MASKS	Replace rejected facemasks <input type="checkbox"/> Yes <input type="checkbox"/> No	Replace missing facemasks <input type="checkbox"/> Yes <input type="checkbox"/> No	COLOR CHANGE FACEMASKS
			FROM: _____ To: _____
JAW PADS	<input type="checkbox"/> DO NOT REPLACE REJECTED JAW PADS		<input type="checkbox"/> DO NOT REPLACE REJECTED CHIN STRAPS
CHIN STRAPS			
RETURNS	<input type="checkbox"/> RETURN REJECTED HELMETS		<input type="checkbox"/> RETURN REJECTED FACEMASKS

SPECIAL INSTRUCTIONS: _____
