

Keyboard/Keyguard Loan Program

Agreement:

I agree to return the keyboard and/or keyguard listed below by the specified date. I will return the product in good condition.

I understand the cost of the loaner program for the product is \$40.00. I will send payment or authorize the charge to the credit card below on the date the product is to be returned. I will return the product via certified mail or UPS.

I understand failure to return the product by the specified date will result in my being responsible for the full sales price plus shipping and handling charges. The loaner cost may be applied toward the purchase of a new keyboard or keyguard within 30 days after return of the product.

Item (on Loan) Information		Customer/Shipping Information	
ltem Name		Name	
Product Number		Address	
Sales Price		City	
Date to be returned		State/ Province	ZIP/ Postal Code
		Country	
Credit Card Information		Home Phone	
Name	Date	Cell Phone	
Signature		FAX	
Credit Card Number	Туре	Company	
Expiration Date		Office Hours	
The return chinning add	lross to Turning D	oint is Turning Point Therapy a	nd Tochnology Inc

The return shipping address to Turning Point is	Turning Point Therapy and Technology, Inc.	
	889 Landa St.	
	New Braunfels, TX 78130	

Turning Point Therapy & Technology, Inc. 899 Landa St., New Braunfels, TX 78131-0945 Phone (877) 608-9812, FAX (830) 608-0882 http://www.turningpointtechnology.com