

Please complete a separate sheet for each suit.

Please find enclosed a			drysuit for repair			
Name:						
Daytime Tel No:		Mobile No:	Mobile No:			
Date:						
E-mail Address:						
Return Address:						
			wrist, socks and ankles a and socks please give sh		t, neck or	
	Amount	Size		Amount	Size	
Neck			Boots	Pairs only		
Wrist Seals			Knee reinforcing			
Gloves	Pairs only		Main Zip			
Socks			Fly Zip			
Ankle Seals			Wet Pressure Test			
	•	be replace	ed like for like unless oth	nerwise marked		
Any Other Repair	r Details:					
You will be contact	ted once your repair	r is comple	eted for payment on the	numbers you ga	ve above	
rice for return car	riage with DPD: I	Most of U	K = £13.50 Highland	ds and Islands	= £22.5	
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t Hammond Drysuits v	WE OCCUSIONALLY CONTA		VOU know our latest news c	and product intorn	ιστιση ιτ ν	

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