SAVY BOWL SWAP PROGRAM REQUEST FORM

Please complete this form to request a SAVY Bowl Swap.

Customer / Dealer Information

Name: _____

Company/Organization: _____

Address: _____

Email: _____

Phone: _____

Stand / Product Information

Stand Model: _____

Stand Serial Number: _____

Current Bowl Type:_____

Requested Bowl Type: ☐ 75mm ☐ 100mm ☐ U4 +$30 ☐ PTZM +$30 ☐ Dual PTZ +$50 ☐ Mitchell +$225

Swap Authorization

Dealer PO Number (if dealer): _____

OR Credit Card Authorization (direct customers):

Cardholder Name: _____

Card #: _____

Expiration Date: _____ CCV#_____

Customer Agreement

I understand SAVY bowls are proprietary components and agree to return the original bowl within **30 days** of receiving the replacement. If the bowl is not returned within 30 days, I authorize SAVY to charge the dealer PO or credit card on file for the price of a full stand sale.

Signature: _____

Date: _____