



JEWELRY WARRANTY CLAIM FORM

If you have questions or need assistance completing this form, please contact us at 800.563.7603

First Name and Middle Initial		Last Name		Date (mm/dd/yy)
Address Line 1				
Address Line 2				
City		Province	Postal Code	
Phone		Email		
School Name		School City		School Province
School Type (check one) <input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> Other _____				Graduation Year (if applicable)
ADDITIONAL INFORMATION				
Signature – if your jewelry item has your personal signature for inside engraving, please sign your name within the box to the right, making sure that no part of your signature crosses over any line. →				
ADJUSTMENTS				
Please specify the exact part of your jewelry item that needs to be corrected. Provide detailed instruction, including new information if you are requesting changes.				
PAYMENT INFORMATION				
If charges apply for warranty work on your jewelry item, we will contact you via phone or email. Payment must be received prior to warranty work being started. If paying by cheque/money order, payment must be received with this order. DO NOT SEND CASH.				
<input type="checkbox"/> Cheque		<input type="checkbox"/> Debit/Credit Card <input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> American Express		
<input type="checkbox"/> Money order		_____ Expiration (mm/yy) ____ / ____		
SHIPPING INFORMATION				
Return your jewelry item and this completed form in a PADDED ENVELOPE via INSURED MAIL* to:		Warranty Service CENTRE PO BOX 8, STATION L WINNIPEG, MB R3H 0Z4		

*Please insure your jewelry item when shipping. Warranty coverage applies to the original item owner and items must be in repairable condition. If upon receiving your jewelry item, charges apply, Jostens will notify you prior to proceeding with your warranty request. Charges apply to customer changes. ©2015 Jostens, Inc.