

## Warranty Registration Form

### Customer Information

Full Name:

Email Address:

Phone Number:

**Address:**

Street:  City:

Postal Code:  Country:

### Product Information

Product Name:  Serial Number:

Date of Purchase:  Place of Purchase:   
(Store name, website, etc.)

Proof of Purchase:   
(Receipt or invoice number)

### Additional Details

Reason for Registration:

☐ Warranty activation (extends from 2 to 5 years) ☐ Product support

☐ Other (please specify):

Would you like to receive information about product updates or promotions?

☐ Yes ☐ No

### Customer Confirmation

I confirm that the information provided is accurate and that I am the original purchaser of the product.

Signature:

Date:

\*To activate the Warranty Extension, please send this completed form and a copy of your purchase receipt to [mail@peakloudspeaker.com](mailto:mail@peakloudspeaker.com)

EXPERIENCE REALITY

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