HITEC

Warranty Registration

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Dear	Cu	Sto	\mathbf{m}	er:

To validate your warranty and help us to serve you better, please fill out and return this warranty registration card *today*!

Name			
Address			
City State	Zip		
()			
Phone			
Date of Purchase:			
The Wizard was purchased for:	The Wizard was purchased from		
☐ Yourself ☐ Gift for Family Member ☐ Gift for Friend ☐ Received as Gift ☐ An Organization or Business ☐ Other	☐ Telephone ☐ Mail Order ☐ Catalog ☐ Hearing Instrument Specialist ☐ Audiologist ☐ Other		
How did you first learn about the Sound Wizard? Advertisement Publication Word of Mouth Demonstration Other	Your Age Grou ☐ Under 20 ☐ 20-35 ☐ 36-45	46-50 56-65 66+	

The Sound Wizard is specifically designed for the hearing impaired.

place stamp here

Sound Wizard Repairs Hitec Group Int. 8160 Madison Ave. Burr Ridge, IL 60521