



Welding & Cutting Equipment

Warranty/Product Registration Form

Model:	Serial Number:
Purchase Date:	Dealer Name:

Purchaser Information

Last Name:	First Name:
Title:	Company:
Address Line 1:	
Address Line 2:	
City/Town:	State/Province:
Country:	Zip/Postal Code:
Phone:	Email:

Purchaser must present a copy of the original proof of purchase, i.e. receipt/invoice, to be mailed in along with the completed Warranty/Product Registration form.