



Repair form /sales

Date:
Completed

Name: _____
Daytime _____
Tel. No: _____
Mobile No: _____
E-mail _____
Address _____

Please mark type required: latex or (neoprene measure in cm/in)

Neck L/N			
St/HD latex			
Wrist Seals L/N		Fly Zip	
St/HD latex			
Ankle Seals		Boots/ size	
Latex/neo Socks		Pressure Test	
Main Zip /size cm		Patches	
St/h/duty		Pockets/braces	

Type or make of suit

Total £

Make cheques payable to (**drysuit repairs**)

Or For cheap postage try

<http://www.parcelmonkey.co.uk/>

Bank Transfer

if sending by royal mail include return postage

Sort Code: 04 - 03 - 33

{always email me when sending suits}

Account: 51291122

WWW.EDINBURGHDRYSUITREPAIRS.CO.UK

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TEL 07720898487

EDINBURGH DRYSUIT REPAIRS

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