



ALTERNATIVE CONTACT INFORMATION SUPPLEMENT FORM

ADDRESS:

Kimberley Jurens Woodwind Repairs
612 B Manchester Rd
Victoria BC V8T 2P1

Phone: 778 977 6128

General Email: info@kjwoodwindrepairs.ca

To complete form:

- 1) Download PDF and "Save as" to your device
- 2) Open the saved file on your device & complete
- 3) Email completed form & include print copy if possible

In case of emergency, I _____ authorize the following individual(s) to accept responsibility for my instrument(s) listed below. This may include collecting my instrument in person, or requesting the item be shipped to the address of their choosing. I understand that any associated charges must be paid in full prior to instruments leaving KJWR Inc.

Name
First , Surname

Alternative designated shipping address

Pronouns
(optional)

Relation
(to owner)

Pick up at KJWR Inc. (pick up time will be arranged)

Email

Ship to address above (Signature Required)

Mobile

Ship as "Hold for pickup" (at a secure location)

Landline

INSTRUMENT 1:

Brand:

Model:

Serial #

INSTRUMENT 2:

Brand:

Model:

Serial #

COMMENTS

I hereby authorize the individual(s) listed above to act on my behalf should I be unable to do so. This may include, but is not limited to: paying for and collecting the instrument(s) listed above, requesting the instrument(s) listed above be shipped to them. In addition I confirm the owner of the instrument(s) either has insurance covering the above during shipping/ transport, or that I am waiving insurance. I understand that Kimberley Jurens Woodwind Repairs Inc. will not provide/select additional insurance for shipping (unless specified in writing), and is not responsible for 3rd party damage etc. should it occur during transport.

Signature:

Date: