

WCH INDUSTRIES, LLC P.O. BOX 55 ELKTON, KY 42220

Phone: (270) 604-7176 Fax: (270) 265-5125 E-mail: Twister360@Twister 360.com

Order Date: ____/__/___/

Sold To:
Company Name:
P.O. Box:
Address:
City/State/ZIP:
Phone:
Fax:
Email:

Limited Warranty Registration

P.O. Number: _____

ShipTo:
Company Name:
P.O. Box:
Address:
City/State/ZIP:
Phone:
Fax:
Facility Manager:
Email:

I have read, understand and hereby accept the terms and conditions of the Limited Warranty accompanying the Twister 360 Installation and Rotation Instructions.

Authorized By:	Inital:	Date:	_//
Signature:	_ Title:		