

2010 Wallenstein Winter FREEze Program Redemption Form

Submission Checklist:

- This form is completed.
- A copy of the bill of sale to the end user is included with this submission (showing the accessory as part of transaction).
- Warranty registration (if not sent in previously)

Retail Customer Info:

Name: _____

Address: _____ City: _____ Zip/Postal Code: _____

State/Province: _____ Phone Number: _____

Purchase Info:

Date of Purchase: _____ Invoice Number: _____

Delivery Date: _____ Product: _____

Model Number: _____ Serial Number: _____

FREE ACCESSORY PROVIDED: _____

Dealer Info:

Dealer Name: _____ Account Number (if known) _____

Address: _____ City: _____

State/Province: _____ Phone Number: _____

Salesperson: _____

Distributor (if applicable): _____

A. (USA & Quebec Dealers). Submit form(s) to your wholesale distributor.

B. (Canadian Dealers): Submit form using information below.

By Mail:

Winter FREEze Promo
EMB MFG INC
4144 Boomer Line,
St. Clements, ON N0B 2M0

Fax:
519-699-4146

Email:
promotions@embmfg.com

