

Gianna Violins

Service Form

Fill out 1 form for each instrument. Enclose inside the case with the instrument.
Print clearly:

| | | |
|----------------------------------|---------------|-------------|
| NAME: | | |
| BILLING/SHIPPING ADDRESS: | | |
| CITY: | STATE: | ZIP: |
| DAYTIME PHONE: | | |
| E-MAIL ADDRESS: | | |

Return shipping address (if different): **Circle:** **Business** **Residence**

| | | |
|--------------------------------------|---------------|-------------|
| Name/ Business: | | |
| Address: | | |
| City: | State: | Zip: |
| Daytime Phone (if different): | | |

Instrument Information:

| | |
|--------------------|---|
| Make: | Model: |
| Serial No.: | Declared Value: |
| Other: | (declared value is for return shipping insurance) |

What problems are you experiencing with this instrument?

- 1.
- 2.
- 3.
- 4.
- 5.

Office Use Only:

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How long have you owned this instrument?

Did you buy it new or used?

From a dealer or an individual?

When was this instrument last serviced?

By whom?

What are you hoping to improve in this instrument?

1.

2.

3.

4.

What style music do you play?

For yourself or in a group?

Hobby or profession?

Do you have a budget for service on this instrument?

Are you interested in receiving information on a new instrument?

What is your spending limit for a new instrument?

Is there anything else you'd like us to know about this instrument?

_____ **I would like a consultation: telephone skype webcam**

**All information will be kept confidential by Gianna Perry, Gianna Violins,
Gianna's Acoustic Showcase & Mandovoodoo Instrument Service.**

Gianna Violins

10091 Unitia Road
Friendsville, TN 37737
865-986-9966

I agree that I will only hold Stephen Perry, Gianna Violins responsible for gross negligence. I accept all risks other than gross negligence. I either have suitable insurance on my instrument or am self-insuring. I accept all responsibility for risk of loss during shipping. I understand and agree with all other terms and conditions provided on (or linked to at) GiannaViolins.com.

Payment in full is due upon completion of all services and/or sales (prior to shipping). At that time I will either enclose payment to ~ or ~ authorize Gianna Violins to charge my credit card which I will provide after receiving my invoice.

Signature: _____ **Date:** _____

Office Use Only:

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