



## Warranty registration

Please complete this warranty registration form to benefit from Steinrikes extended **10-year** frame warranty according to our warranty regulations. **For registration, please complete this form, add a copy of your bill as a proof of purchase and return it within 4 weeks after purchasing your new recumbent trike. You may either send it by letter or e-mail:**

**Postal address: Steinrikes d.o.o.**  
Srednja 20  
24000 Subotica  
Serbia

**E-mail: [register@steinrikes.com](mailto:register@steinrikes.com)**

Mr / Ms

First name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Adress: \_\_\_\_\_

ZIP/City: \_\_\_\_\_ Country: \_\_\_\_\_

### Tricycle details:

Model name: \_\_\_\_\_

Serial number: \_\_\_\_\_ Date of purchase: \_\_\_\_\_

Retailer: \_\_\_\_\_

I acknowledge that personal data I disclose about myself will be stored, processed and used solely by Steinrikes d.o.o. for warranty processing.

I accept that stored personal data I disclose about myself will be used solely by Steinrikes d.o.o. to contact me for advertising purposes, via post, e-mail or phone. Please keep me up to date about future products or events.

- via e-mail \_\_\_\_\_  
- via phone \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_