

CONTACT AND DROP OFF FORM

(Please Include with all items)

Date: _____

Name: _____

Address: _____

*B.A Nicolson Svcs
519-374-4670
banicolson@bmts.com*

Most Reliable Contact Number: home _____ cell _____

Email: _____

Other Contact Info (stable, barn, work): _____

Please NOTE that we will take considerable care while cleaning your blanket, however fabric blankets, or those in otherwise fragile condition, may not take well even to the gentlest wash. With your signature you recognize this risk. PLEASE DO NOT SEND ANY LEG STRAPS.

Signature: _____

Number of blankets/items: _____

Work Requested: Clean _____ Re-waterproof _____ Repair _____
(maximum \$ _____)

Brief description of blanket/item (list multiple items on the reverse side):

When do you need the blanket/item returned: _____

Special Requests: _____

Minor repairs required

OFFICE USE ONLY

Major repairs referral

Identification No. _____

Missing parts _____

Cheques payable to B. A. Nicolson

Extra dirty washing required.

- Invoice _____