



Swim & Fitness Spa Order Form

<p>Order Date: _____ P.O. # _____</p> <p>Spa Retailer Name: _____</p> <p>Contact Name: _____</p> <p>Address: _____</p> <p>City, State : _____</p> <p>Zip: _____ Company Phone: _____</p> <p>Fax: _____ Cell: _____</p> <p>Email: _____</p>	<p>Promotion / Discount Code: _____</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"><p>Customer / End User *</p><p>Name: _____</p><p>Address: _____</p><p>City, State: _____</p><p>Phone: _____</p><p>Email: _____</p></div>
<p>Delivery Instructions: _____</p> <p>Requested Ship Date: _____</p>	

Swim & Fitness Spa Model

Series Name _____

Model Name _____

M Series™ Cabinet : PermaWood™ Gray: _____

PermaWood™ Brown: _____

Accessories:

_____ Black PermaWood™ 4-Tier Steps w/stainless rail

_____ right side rail _____ left side rail

_____ Cover Shelf Cover Lifter (2 sets required)

_____ CoverMate III (2 sets required)

Swim Spa Options:

_____ BlueTune™ Audio

_____ Eclipse LED Lighting™

_____ Oasis LED Lighting™

_____ WAVE™ Wireless Control*

*for dualzones: Fitness zone _____ Hot Tub zone _____

Exercise Equipment Options:

_____ AquaForce™ Resistance Pulley (standard on Vitality™)

_____ AquaCross™ Tether System (NOT offered on TruSwim®)

_____ AquaBalance™ (side mounted stainless hand bars)

_____ MotionMat™ (non-slip tread)

_____ MatTrax™ standard design* (note model)

_____ *for dualzones: Fitness zone _____ Hot Tub zone _____

_____ MatTrax™ graphic design (note model)

_____ *for dualzones: Fitness zone _____ Hot Tub zone _____

Comments and Special Instructions:

Please contact the factory to verify completion of order prior to pick-up or delivery. An acknowledgement will be faxed or e-mailed the next business day after order is processed. Contact the factory if the acknowledgement is not received or if there is an error.

*All fields on this form are required to ensure accurate production, communication in event of recall, warranty concerns, etc.