



REGISTRATION #: _____

For GS4 Warranty Division Use Only

Product Warranty Registration

*Name: _____

*Street Address: _____

*City, State Zip: _____ *Email: _____

*Phone #: (_____) _____ - _____

*Date of Purchase: ____/____/____ *Price Paid (excluding Sales Tax) \$ _____

*Name of Store Where Purchased: _____

*Store Location: City/State: _____

*Sku #: _____ (Located on Hangtag or Woven Label Inside Bag)

Is this your first Global Solutions 4 Purchase? Yes No



Mail the following to complete the registration of your product to the address below:

1. Completed Registration Form
2. ORIGINAL SALES RECEIPT (from an authorized reseller)
3. ORIGINAL Hangtag (UPC)

Global Solutions 4
Warranty Department
66001 Lyons Road, Suite C-5
Coconut Creek, FL 33073

***PLEASE keep a copy of all paperwork submitted for your reference.**

Registration must be completed within 30 days from original purchase date and is extended to the original consumer. Once we receive all of the above items, we will complete the registration process and send a copy back for your records.

GLOBAL SOLUTIONS 4, LLC.

Corporate Office
6601 Lyons Road, Suite C-5
Coconut Creek, FL 33073
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www.GlobalSolutions4.com