

Please use this form when sending your Polar Heart Rate Monitor for non-warranty service to an Authorized Polar Service Center. Print this page, complete the requested information and return with your unit. We recommend that you use a traceable and insured shipping method, such as UPS or Insured US Mail. Polar service centers are not responsible for items lost in transit.

**Expedite** your repair by including your credit card information and pre-authorizing repair charges. The amount we recommend is \$75 which will cover receiver battery, replacement transmitter (most common repairs) and return shipping. Please include a credit card number (Visa, MasterCard or American Express) with expiration date and authorize charges to \$75. **You will only be charged the cost of the actual repair.** If the repair cost is more than the amount authorized, we will contact you by mail or e-mail to authorize any additional charges.

If you have a warranty repair, or would like to send your repair to Central Service (NY) please start the Online Repair Registration Process @ <https://support.polar.fi/service/pscsprereg.nsf/starting?openForm>

If paying by check, payment must be in exact amount of repair charges - you will receive an estimate via e-mail or US mail. Please **DO NOT SEND CASH**.

Please allow 5-7 business days for your repair to be completed (during peak seasons, repair time may be longer). All repairs come with a 90-day warranty.

**CUSTOMER INFORMATION:** [PLEASE PRINT CLEARLY]

Name: \_\_\_\_\_ Tel No: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Please list contents and quantity below:

- |  |            |   |   |
|--|------------|---|---|
| <input type="checkbox"/> Receiver      | Qty: _____ | Model _____<br><small>(See receiver lens or back cover)</small> | Serial No _____<br><small>(See back cover of the receiver case)</small> |
| <input type="checkbox"/> Transmitter   | Qty: _____ | Model _____<br><small>(See front of transmitter)</small>        | Serial No _____<br><b>(WEARLINK ONLY – See back of connector)</b>       |
| <input type="checkbox"/> Elastic Strap | Qty: _____ |   |   |

Brief description of problem: \_\_\_\_\_

Please choose one:

- I authorize work to be carried out up to the value of: \$ \_\_\_\_\_ (\$75 recommended)  
**FOR CREDIT CARD PAYMENT ONLY**  
Credit Card# \_\_\_\_\_ cvv code \_\_\_\_\_ Exp Date \_\_\_\_\_ Signature Text \_\_\_\_\_
- I would like to have a price estimate. I understand that my repair will be held until I provide payment. (A letter will be sent via mail or e-mail)

**(800) 227-1314 | [customer.service.usa@polar.com](mailto:customer.service.usa@polar.com)**

OUR REPRESENTATIVES ARE AVAILABLE TO ASSIST YOU MONDAY – FRIDAY FROM 9:00AM TO 5:00PM