HERFF JONES RING WARRANTY FORM

Please complete the form below and enclose when submitting your ring for a warranty claim.
All information below is required.

Name	
Address	
City/State/Zipcode	
Daytime Phone (including area code)	
Evening Phone (including area code)	
Email Address	
School Name	
Campus/City/State of School	
Approximate Date of Purchase (Month & Year)	
Order Number (if known)	

Reason for Warranty Claim

Send a printed copy of this claim form and your appropriately packaged ring using an insured and traceable shipping method that includes a delivery confirmation to:

Herff Jones, Inc. Warranty Services Dept.
Herff Jones Center
150 Herff Jones Way Warwick, RI 02888