

Slone Saddle Repair Form

Please complete this form and include with your saddle shipment. One of our team members will be in contact upon evaluating the saddle. A 50% deposit is required to begin work on all repairs that are not under warranty.

Thank You!

Contact Information:

Name: First

Last

Phone #:

Address:

City:

State:

Zip:

Email Address:

Repair Information (Please check all that apply) :

Re-tree:

Replace Horn:

Replace Seat:

Replace Binder:

Clean & Oil:

Other:

Additional
Information:

(For Office Use Only)

Assessed By: _____

Repair Estimate: _____

Date Received: _____