



BATTLE FOAM® TRADE IN PROGRAM PACKING FORM

First Name _____ Last Name _____

Address _____

Home Phone _____ Cell Phone _____

Email _____

Packing Slip (please use the section below to tell us what you have shipped)

Example – 1 Mark II SD bag with foam _____

_____ 2 GW small hard cases _____

_____ 1 GW large hard case _____

Items Shipped

Your shipping charges _____ (include shipping receipt for credit)

We only accept ground shipments. Please do not ship express. We only reimburse for shipments up to \$20.00.

Ship all packages to:

Battle Foam®

Attn: Bag Trade In Program

240 N. Sunway Dr.

Suite 100

Gilbert, AZ 85233