

Kite Repair Form - Good Breeze Kiteboarding/A Flip Kite Repair

Name: _____ Date : _____

Email: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone #: _____

Year _____ Brand _____ Model _____ Size: _____

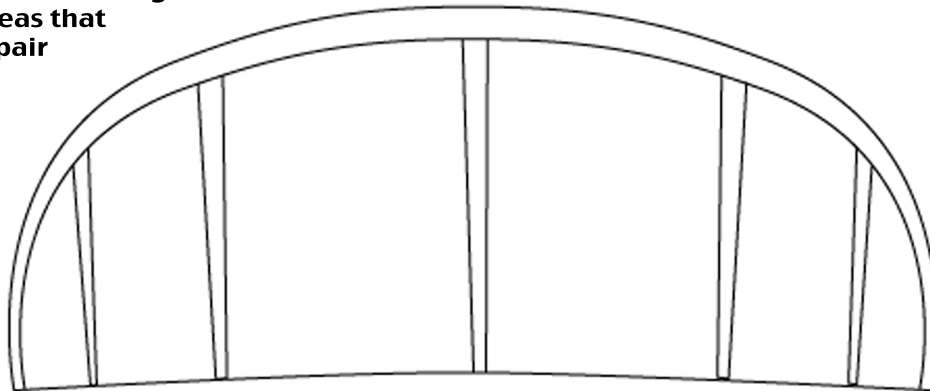
Kite Bag included: ☐ Yes ☐ No

I authorize work to be done if under the amount of \$ _____ without contacting me prior. Customer acknowledges that the kite being repaired is a used product. Company is not responsible for any loss or injury as a result of this repair. Customer agrees to hold (Good Breeze Kiteboarding or its agents) harmless from any liability, loss or injury claimed by anyone as a result of this repair.

Signature: _____

Description of Damage/Issues to be repaired: _____

*Please mark on kite drawing
above the areas that
need repair



Additional Notes or Bladder Work: _____

Internal Use Only

Customer Quoted: \$ _____ Notified of Completion (Date): _____

Materials and Parts: _____

Labor Time: _____ Final Price: \$ _____ Sale ID #: _____

Invoice Paid (Date): _____ Customer Picked Up (Date): _____