



EQUINE COMFORT BOOTS

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Product Registration

Submission of this form will put your current purchase information into Soft-Ride's customer database. It will enable you to receive future new product and product update notifications. Your registration codes will also be kept on file under your name in case they are needed in the future.

* Required Information

Personal Information

First Name *
 Last Name *
 Phone Number
 E-mail Address *
 Mailing Address *
 Province / Region / Territory (if applicable)
 City * State * Zip / Postal Code *
 Country of Residence *

Business Information (if applicable)

Business Name *
 Type of Business * Other

Retail Purchase Information

Please select the Soft-Ride Boot Size purchased *
 Purchase Date * MONTH DAY YEAR
 Purchased From *

(In the box below, please type the name of the wholesaler which you purchased your Soft-Ride boots from)

Comments

We welcome any comments you might have relating to your purchase of our Soft-Ride Equine Comfort Boots...how did we do???

Submit