7 Day Trial Application

Conditions

1. Fill out this form and mail, fax, or email it back to us *with your signature*. Please make sure to provide an address for daytime delivery to avoid delays in getting the instrument to you. A signature will be requested upon delivery (No P.O. Boxes).
2. For insurance purposes, please provide us with a major credit card (VISA, MC or AMEX only). Information will be strictly confidential and will not be shared with any other companies. The total trial fee will be charged to the card before the shipment is sent. We will only charge your credit card for the trial fee. However, in the unlikely event of damage to the instrument during the trial, all repairs will be charged to your credit card at our standard repair rate.
3. We require a fee of **$75.00** for headjoint trials and **$85.00** for flute trials which will cover shipping to you, insurance, and a pre-paid UPS return shipping label. Simply call 1-800-PICK-UPS (1-800-742-5877) and tell them that you have a package that is ready to ship with a prepaid return label. You may also drop off the instrument at a near by UPS store. *Shipments to the Western and Southern U.S. might incur a $5 to $25 shipping cost increase for flute trials.*
4. We ship via UPS Next Day delivery and all shipments are fully insured for up to $100,000. Shipments over $100,000 will require additional insurance to be paid by the customer. No return shipping insurance is necessary.
5. After the trial period has ended, please return the flute in the original shipping packaging using the UPS prepaid shipping label. **DO NOT** ship by any means of ground transportation. Trial customers are liable for any damage if ground shipping is used. **Please do not ship back on a Friday** (this avoids over-the-weekend storage and temperature issues). Trials will typically start & end on a Mon, Tues, Wed, or Thurs.
6. The 7-day trial begins when you receive the instrument(s). Customers who fail to return the instrument(s) within 7 days without prior notice or arrangements are subject to a late charge of 0.15% of the total value of the shipment per day. *Ex: $9,000 x 0.0015 = $13.50 per day.* The credit card provided may also be used to cover these charges.

Customer Information

Name: _____

Home (Billing) Address: _____

Shipping Address: _____ **City**: _____ **State:** _____ **Zip:** _____

Phone: _____ **Fax:** _____ **Cell:** _____ **Email:** _____

Your current instrument(s): _____

(Wall thickness is needed especially if trying Nagahara headjoints on your flute body)

Credit Card #:_____ **Expiration Date**: _____

Card type: ❑ VISA ❑ MasterCard ❑ AMEX **Issued by:** _____**Company tel.:**_____

Name of Cardholder ***(if different from above)***: _____ **Signature of approval:** _____

Customer (and parent if customer is under 21) assumes all responsibility (including damage, loss, and late return charges for all instruments received on trial.

Trial Instrument Information

Please call or email if you need more information or assistance.

Requested Instrument(s):_____ **Model:** ❑ **Standard** ❑ **Full Concert** ❑ **Galway**

Options: _____ **Headjoint preferences:** _____

Requested arrival date(s): ___/___/____ or ___/___/____ **Notes:** _____

Signature

I have read and agree to the Nagahara Flutes instrument trial agreement and the policies outlined above. If damage or loss is caused by negligence on my part, I agree to pay damages up to the full value of the instrument while it is in my possession. I authorize Nagahara Flutes to charge my credit card in the event of any damage, loss, or late return shipment (unless another form of payment is agreed upon). I understand that the flute(s) and/or headjoint(s) sent to me on trial may not be available for sale. (Any flute order placed after the trial period is subject to a waiting period of up to one year, and will require a 50% non-refundable deposit before production begins.) I am over 21 years of age or have a guardian sign for me who is over 21 years of age.

Customer Signature: _____ **Print Name:** _____ **Date** _____

Guardian's Signature: _____ **Print Name:** _____ **Date** _____

All the information that has been provided is strictly confidential and will not be shared outside of Nagahara Flutes.

Please send this signed and completed form by mail, fax, or email to:
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