



AirTouch™ N20 30-Day Guarantee

Please complete all sections on this form and send to **anzproductguarantee@resmed.com.au**. ResMed will provide you with a replacement credit based on the terms and conditions set out in the Authorised Dealer Instructions. **Valid for AirTouch N20 Starter Pack or AirTouch N20 3-pack of cushion purchases made between 1 December 2020 to 31 December 2020.**

1. Authorised Dealer name: _____
Authorised Dealer location: _____
Customer's name: _____ sleepvantage member no.
Offer selected: _____
Return date: _____
AirTouch N20 product purchased: _____
Purchase date: _____
Note: the money back guarantee is only available for AirTouch N20 Starter Pack purchases.

2. Is the mask or cushion damaged or does it have a quality defect? NO YES
If you answered yes, please do not use this form. Please follow the normal warranty process.

3. **Reason for return**
Please select the primary reason for returning the ResMed AirTouch N20 or swapping the cushions.
The customer:

<input type="checkbox"/> Reported discomfort while using the mask	<input type="checkbox"/> Disliked cleaning method
<input type="checkbox"/> Disliked seal	<input type="checkbox"/> Disliked the thought of regular replacement
<input type="checkbox"/> Preferred a different fit	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Reported mouth breathing	
<input type="checkbox"/> Disliked the feeling of UltraSoft™ memory foam	

4. By signing this form you accept the terms and conditions of the AirTouch N20 30-Day Guarantee.
 You acknowledge that you received the AirTouch N20 Starter Pack or 3x cushions from the customer, including any bonus cushions provided as part of the promotion.
Signature of sleep therapist: _____ Date: _____
Printed name of sleep therapist: _____