

LOST RING PROGRAM



A Varsity
ACHIEVEMENT
Brand

Date Rec'd: _____
For office use only

The Lost Ring Program (LRP) is designed to help you obtain a replacement ring if your class ring is lost or stolen. The LRP is in effect only for your original ring.

Contact customer service at 800.451.3304 x1278 or x401935 to obtain a current quote to replace your ring. Due to fluctuations in the gold market, rings may have a taxable surcharge.

In order to process your LRP claim, please fill out the form completely and return.

*LRP is not available on High School Championship rings, College Championship rings, College rings, or Commercial rings.

The replacement ring will be manufactured using the same specifications as your original ring. If a Royal CZ, diamond or other precious stone was originally supplied; a non-precious stone of your choice will be substituted unless you choose to pay for the replacement of the original stone. Orders will be processed upon receipt of claim and payment, please allow eight to ten weeks for delivery.

Coverage is for six years for rings purchased after 7/1/06.

ANY CANCELLATION OF A LRP UNIT WILL FORFEIT HALF OF THE APPLICABLE FEE.

Please provide a brief statement of how your ring was lost or stolen:

Please provide your finger size for the replacement ring _____ (whole and 1/2 sizes only)
Don't know your ring finger size? Contact your local Herff Jones representative (herffjones.com/repfinder).

Student name given on original order: First: _____ MI: _____ Last: _____

Address: _____ Apt. # _____

City: _____ State _____ Zip: _____ Daytime Telephone #: _____

PLEASE CHECK HERE IF ADDRESS HAS CHANGED IN LAST 6 YEARS. (Herff Jones is not liable for any misdirected packages).

Email address: _____

Student School Name: _____ State of School: _____ Graduation Year: _____

Payment methods: **Please do not send cash.** Your local state tax is required.

Check: _____ Money Order: _____ **Make check payable to Herff Jones.**

Visa: _____ MasterCard: _____ Discover: _____

Cardholder's Name: _____ Cardholder's Signature: _____
(Please print)

Account Number: _____ Exp. Mo/Yr _____ \$ _____

MAIL TO: Attn: LRP, Herff Jones, Inc., 150 Herff Jones Way, Warwick, RI 02888 **or**
FAX: (401) 941-9140

Contact Us: **t** 800.451.3304 x1278 or x401935
customersatisfaction@herffjones.com