

**SunRay Saunas Warranty Card**

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Date Purchased: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Purchased from: \_\_\_\_\_

Model Number: \_\_\_\_\_ Serial Number: \_\_\_\_\_

Mail To: ***SunRay Saunas***

**Attn: Claims Department**

**7494 Industrial Park Road, #M**

**Mechanicsville, VA, 23116**