

Customer Information



Name: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Phone: _____

Shoes: _____

We use your e-mail to notify you when your shoes ship. We use your phone number to call if there are questions.
We won't share your information with anyone.

Repairs: _____

I'm not sure, please do whatever is necessary!

We will contact you with an estimate.

1/2 Resole \$30.00 x _____ pairs = \$ _____

Rubber: Vibram XS Edge 5.10 Stealth C4 Vibram XS Grip (+ \$3.00)

Rand Repair \$10.00 x _____ shoes = \$ _____

1/2 sole is required for rand work.

Strap/Buckle/Velcro \$7.00 x _____ straps = \$ _____

Approach shoes \$55.00 x _____ pairs = \$ _____

Shipping: _____

Return shipping \$7.00 + (\$3.00 x _____ xtra pair) = \$ _____

Payment: _____ **Total = \$** _____

Online: I would like to pay online via an emailed invoice.

Credit Card: Visa Master Card Discover

Number: Exp. Date: CVN:

Billing Zip: _____

Signature: _____

Check: Payable to New England reSoul.

Receipt: _____

I would like my receipt:

Emailed Included with my shoes I don't need a receipt