

Product Replacement Form

Dear customer,

our top priority is the wellbeing of your family. Our promise 'Always with you' is at the forefront of what we do; we sincerely hope you and your kids are all safe and sound.

We kindly ask you to fill out this form and send it back to hello@swandoo.com.

CHILD SEAT INFORMATION

Model: _____

Serial number: _____

(This can be found on the sticker on the bottom of the seat)

Purchase date: _____

(e.g. 13/May/2019)

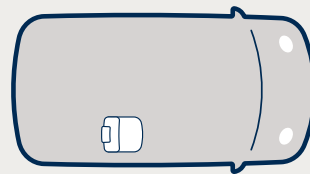
Place of Purchase: _____

(e.g. Name and place of the Retailer)

The following information will be carefully analysed by our R&D team. We strive to continually research and optimise our products, making our little ones safer. These answers are not mandatory but may greatly help our experts analyse the performance of our seats and improve them for next generations.

Thank you in advance for your help!

Position in the vehicle: _____



How was the child seat fixed?

ISOFIX

Seat Belt

Not fixed

Child seat direction:



Rearward facing



Forward facing

VEHICLE INFORMATION

Brand (e.g. Audi, Toyota...): _____

Model: _____

Year: _____

Steering wheel position:

Left

Right (e.g. UK, Japan)

CHILD INFORMATION



Nickname: _____

Age: _____

Height: _____

cm

in

Weight: _____

kg

lb

Did the child suffer any injuries?

No, none

Minor (e.g. contusions, cuts...)

Severe (e.g. burns, fractures, internal injuries...)

Did she/he receive medical attention?

No

Yes, in the Emergency Room

Yes, hospitalized for more than 24h

EVENT INFORMATION

Date and time: (e.g. 13/May/2019 - 24:00)

Place of the event: (e.g. street, district, address)

Type of road:

Number of people traveling in the vehicle:

Did the driver suffer any injuries?

Did she/he receive medical attention?

Short event description:

Speed:

_____ Km/h mph

City street

Multi-lane motorway/highway

Country road

No, none

Minor (e.g. contusions, cuts...)

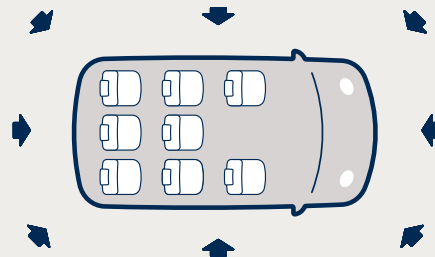
Severe (e.g. burns, fractures, internal injuries...)

No

Yes, in the Emergency Room

Yes, hospitalized for more than 24h

Impact direction:



Additional information:

Another vehicle was involved

The vehicle rolled over

The police were involved

Airbags were deployed

Before submitting the form please attach: **a police report** or an insurance claim, **the original invoice**, and if you have them, pictures of the vehicle, the installation situation, and/or the child seat after the event.

The product replacement program is voluntary and does not involve a financial reimbursement, or any other offer, other than a replacement of an equivalent car seat. We also reserve the right to change, alter, amend, or cancel any terms & conditions at any time without prior notice or obligation.

By signing this document you agree your data will be processed and used for the given purpose by Swandoo GmbH according to our Privacy Policy: swandoo.com/privacy-policy.

Place, Date

Name, Signature