



It is recommended that you insure the package for its trip here through your insurance provider or shipper.  
 Fill out completely and retain one (1) copy for your records and send (1) copy for each box sent.

**PLEASE SEND PACKAGE TO**

**Helicopter Institute  
 201 American Concourse Suite 110,  
 Fort Worth Texas, 76106**

**RETURN TO**

Company: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Zip Code: \_\_\_\_\_

**RETURN TO**

Company: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Zip Code: \_\_\_\_\_

**CONTACT INFORMATION**

Fill in the contact information in the event we need to reach out to discuss a repair.

Contact Name: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**ITEMS BEING SENT**

Please list each NVG included in this box.

	Example	1	2	3	4
<b>Make/Model</b>	F4949				
<b>NVG S/N</b>	123456				

**CUSTOMER SHIPPING INFORMATION**

Fill in your return shipping information, otherwise, packages will be sent back on our Fedex-Ground account and billed to the customer.

Estimate/Invoice# (If applicable)	Shipment Option Fed Ex / UPS	Shipping Account #	Delivery Option Overnight / 2-day/ 3-Day / Ground