

Comfort Zone Application Certificate

1. Please enclose a check for **\$50** with this application and mail to: **ComfortFit Labs, Inc.**
P.O. Box 1191, Jenkintown, PA 19046
2. After your check has been received by the lab, we will send out your ComfortFit I.D. number and any additional information you need to have your devices adjusted.
3. When and if it becomes necessary, return your orthotics with a prescription from your practitioner, along with your ComfortFit I.D. number and expiration date.
4. After all necessary adjustments are made to your orthotics, we will return them to your doctor's office or the location of your choice.

For lab use only: ComfortFit Log # _____

Comfort Zone I.D. # _____ Exp. Date: _____

Patient's Name: _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Date of Birth _____

Prescribing Practitioner/Group Name _____

Address _____

City _____ State _____ Zip _____

Telephone _____

Enclose a check for **\$50** payable to **ComfortFit Labs, Inc.**

or by credit card: Visa MC Amex Discover

Card # _____ Expiration Date _____

I understand and accept the terms and conditions set forth in the Comfort Zone program. I have 4 weeks from delivery of my orthotics to enroll in this program without being charged the extra \$10. This program is only available through your prescribing physician's office and is non-transferable and non-refundable.

Patient's Signature _____

Date _____

*You have entered a
dimension of comfort,
a dimension of quality,
but for peace of mind
you should enter ...*

The COMFORT ZONE



ComfortFit Labs, Inc.
246 Columbus Avenue
Roselle, NJ 07203

The COMFORT ZONE



The Comfort Zone

ComfortFit Labs is proud to offer The Comfort Zone — an extended warranty program that protects your orthotics against the unexpected for two full years.

\$50 gets you 24 months of continuous warranty coverage of your orthotics.

No questions asked.

Send the enclosed, completed application with a check, money order or credit card information, including expiration date, to:

ComfortFit Labs, Inc.
P.O. Box 1191
Jenkintown, PA 19046

Or simply call us at **888-523-1600**. Your application and credit card information will be taken over the phone. Upon receipt of your application and the \$50 fee, your coverage will begin. You will receive by mail your Comfort Zone I.D. number.

Toward the end of your 24-month coverage in The Comfort Zone, a renewal application will automatically be sent to you. Renewing your policy for another consecutive 24 months will cost another \$50. To keep your policy, simply complete the application and forward the \$50 or call 888-523-1600.



What exactly is covered under your "Comfort Zone coverage"?

You will receive 24 months of full coverage for your custom-made orthotics. This coverage includes any orthotic adjustment that your doctor deems necessary. Your coverage also includes full replacement of your orthotics as a result of irreparable damage. A \$40 surcharge is required for replacement of your orthotics if they are lost or stolen (there is no surcharge for cracked shells or outgrows), and only one replacement can be made during the two-year contract period. Should a replacement be necessary due to loss, theft, outgrowth or irreparable damage, the current policy is terminated and a new two-year Comfort Zone application will need to be purchased for the new pair of orthotics.

Is there a charge for lost or stolen orthotics?

Yes. There is a \$40-per-pair surcharge to replace one pair of orthotics. Only one pair of orthotics per 24 months will be warranted and replaced per policy period.

What happens if my child outgrows his or her orthotics within the 24-month policy?

A child up to the age of 17 is allowed one outgrowth per 24-month period. If this occurs, new casts need to be made. Please contact your physician to make a new cast.

How long can I wait to sign up for the Comfort Zone after I receive my orthotics?

You have 4 weeks from the time your orthotics were dispensed for you to take advantage of the coverage for 24 months for \$50. If at any time after the 4 weeks you would like to take advantage of the Comfort Zone policy, just send in the application and \$60. A full 24 months of coverage will start from the date we originally sent your devices to your practitioner.

Are my doctor visits covered for treatment under the Comfort Zone policy?

No. Only work done by ComfortFit Labs, Inc., is covered under your policy. Check with your physician about fees and standard office visit charges prior to making an appointment.

How do I get my orthotics to ComfortFit Labs for adjustment?

If your orthotics break or need to be refitted, repaired or adjusted, please go to the prescribing physician who originally dispensed your orthotics. Your physician will determine whether or not new casts of your feet are required. If only the top cover needs replacement, you can send your orthotics directly to ComfortFit, prepaid along with detailed repair instructions, to the following address:

ComfortFit Labs
Attention: Comfort Zone Services
246 Columbus Avenue
Roselle, NJ 07203

If you are returning your orthotics, please include your name, address, telephone number and your Comfort Zone I.D. number (Z_____).

Welcome to ...

The
COMFORT
ZONE