

Name :	Rider Weight (without gear):	
Phone:		
Address:		
Make:	Model:	Year:
Type of Riding:	Ability:	
What do you like about the bike:		
What do you dislike about the bike:		
Work To be done:		
Quoted:		
Shock Treatment		
Postal : PO Box 3019, Wallacia, NSW 2745		
Courier : 639 Greendale Rd, Wallacia, NSW 2745		