

# Dynatron® 125™ Limited Warranty

DYNATRONICS CORPORATION warrants the Dynatron 125 products and the applicator soundheads (excluding other accessories) that are purchased with the unit to be free from factory defects in materials and workmanship under normal use for TWO YEARS from the date of purchase by the original owner. Accessories that accompany this product (which are listed as “accessories” on a list included with each unit) are warranted for 90 DAYS. If this product is defective within the warranty period, DYNATRONICS will, subject to the conditions set forth below:

- (1) repair or replace defective parts at no charge within a reasonable period of time with new or remanufactured parts, at DYNATRONICS’ option; and
- (2) provide labor for the repair or replacement of defective parts under this warranty without charge.

Parts used for replacement under this warranty are warranted for the remainder of the original warranty period. THE REPAIR OR REPLACEMENT OF DEFECTIVE PARTS SHALL CONSTITUTE THE SOLE AND EXCLUSIVE REMEDY IN THE EVENT OF A BREACH OF WARRANTY.

**REGISTRATION REQUIRED.** In order for this warranty to be valid, the warranty registration card (included with the product) must be filled out and returned to DYNATRONICS within 30 days of purchase by the original owner. A copy of an invoice or receipt may be requested to verify purchase date.

**REPAIRS.** All repairs must be performed by an authorized service facility. Any modifications or repairs by unauthorized parties will void this warranty.

**OBTAINING WARRANTY SERVICE.** Authorization by DYNATRONICS is required before obtaining service under this warranty. Therefore, before shipping or delivering this product to an authorized service facility for warranty service, call DYNATRONICS and obtain a return authorization number.

**PACKAGING AND SHIPPING.** Any unit shipped to an authorized service facility for service under this warranty must be in the original shipping carton, freight prepaid, fully insured, and properly packed to prevent damage. DYNATRONICS is not liable for any damage to the unit while in transit. Include a summary of the problem with the product. Write the return authorization number obtained from DYNATRONICS on the shipping label.

**SHIPPING COSTS.** Within the first 30 days of the warranty period, DYNATRONICS will pay all necessary shipping costs associated with obtaining service under this warranty. After the first 30 days of the warranty period, the owner is responsible for all costs associated with shipping the product to an authorized service facility. DYNATRONICS will pay all costs associated with shipping the product back to the owner after service is completed, and will ship the product using the same carrier or type of carrier and service that was used by the owner for the incoming shipment.

**EXCLUSIONS.** Any defect, malfunction or failure caused by or resulting from improper installation, service, maintenance or repair, or from abuse, neglect, transportation, accident, act of God, or other cause beyond the control of DYNATRONICS will not be covered by this limited warranty. ANY IMPLIED WARRANTIES COVERING THIS PRODUCT, INCLUDING BUT NOT LIMITED TO WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, ARE LIMITED IN DURATION TO ONE YEAR FROM THE DATE OF PURCHASE BY THE ORIGINAL OWNER. DYNATRONICS SHALL NOT IN ANY CASE BE LIABLE FOR SPECIAL, INCIDENTAL, CONSEQUENTIAL, INDIRECT, OR OTHER SIMILAR DAMAGES ARISING FROM BREACH OF WARRANTY, BREACH OF CONTRACT, NEGLIGENCE, OR ANY OTHER LEGAL THEORY EVEN IF DYNATRONICS HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES. SOME STATES DO NOT ALLOW LIMITATIONS ON HOW LONG AN IMPLIED WARRANTY LASTS OR THE EXCLUSION OR LIMITATION OF INCIDENTAL OR CONSEQUENTIAL DAMAGES, SO THE ABOVE LIMITATION OR EXCLUSION MAY NOT APPLY TO YOU. THIS WARRANTY GIVES YOU SPECIFIC LEGAL RIGHTS, AND YOU MAY ALSO HAVE OTHER RIGHTS WHICH VARY FROM STATE TO STATE.

For more information concerning repairs, operation, or technical assistance, please contact the DYNATRONICS dealer nearest you, or contact DYNATRONICS directly at: the address below.

## Dynatronics Corporation

7030 Park Centre Drive • Salt Lake City, Utah 84121 • (801) 568-7000 (800) 874-6251

## Dynatron® 125™ Warranty Registration

To register the warranty for your Dynatronics unit, complete all information requested, and MAI, FAX, or EMAIL to:  
 Dynatronics, 7030 Park Centre Drive, Salt Lake City, Utah 84121, Fax: 801-568-7711, Email: info@dynatron.com.

PLEASE TYPE OR PRINT PLAINLY					
Purchase Information:					
Purchase Date:		Model Number:		Serial Number:	
Practitioner / Contact Name:					
Clinic or Institution:					
Address:					
City:		State:		Zip:	
Dynatronics' Sales Representative:					

- I have read and understand the information contained in the operator's manual for this device.
- I have received in-service training from my dealer and/or Dynatronics for this device.

**IMPORTANT: If there is anything about the operation or use of your Dynatron device that you do not understand, contact your dealer or Dynatronics for instruction. As a trained medical practitioner, you are solely responsible for determining appropriate application of this device for your patients.**

**BEFORE RETURNING A UNIT TO DYNATRONICS FOR SERVICE, YOU MUST OBTAIN A RETURN AUTHORIZATION NUMBER. CALL 1-800-874-6251.**

**Failure to register the warranty may result in a delay in completion of services, and service will be billable.**

**How did you hear about the Dynatronics product you just purchased? (Check all that apply)**

- |                                      |                                   |                                     |   |
|--------------------------------------|-----------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Referral | <input type="checkbox"/> Trade Show | <input type="checkbox"/> Magazine Article |
| <input type="checkbox"/> Mail        | <input type="checkbox"/> Dealer   | <input type="checkbox"/> Catalog    | <input type="checkbox"/> Other _____      |

**Decision to purchase your equipment was based on? (Check all that apply)**

- |   |                                   |  |  |
|---|-----------------------------------|--|--|
| <input type="checkbox"/> Advertising        | <input type="checkbox"/> Price    | <input type="checkbox"/> Peer Recommendation | <input type="checkbox"/> Other (Specify) _____ |
| <input type="checkbox"/> Product Literature | <input type="checkbox"/> Features | <input type="checkbox"/> Dealer              | _____  |
| <input type="checkbox"/> Company Reputation | <input type="checkbox"/> Demo     |  | _____  |

**How do you find information about therapy products you want to purchase? (Check all that apply)**

- |                                    |  |  |  |
|------------------------------------|--|--|--|
| <input type="checkbox"/> Magazines | <input type="checkbox"/> Other Practitioners | <input type="checkbox"/> Trade Show        | <input type="checkbox"/> Other (Specify) _____ |
| <input type="checkbox"/> Mail      | <input type="checkbox"/> Dealer              | <input type="checkbox"/> Product Reference | _____  |

**For information about therapy products, what magazines do you read? (Please list all that you read) \_\_\_\_\_**

**What features are you most interested in when purchasing equipment? (Check all that apply)**

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> User Friendliness | <input type="checkbox"/> Warranty              | <input type="checkbox"/> UL Listing            | <input type="checkbox"/> Number of Channels     |
| <input type="checkbox"/> Portability       | <input type="checkbox"/> Accessory Package     | <input type="checkbox"/> Educational Materials | <input type="checkbox"/> Company/Dealer Support |
| <input type="checkbox"/> Price             | <input type="checkbox"/> User Programmable     | <input type="checkbox"/> Design                | <input type="checkbox"/> Other _____            |
| <input type="checkbox"/> Unique Features   | <input type="checkbox"/> ERA                   | <input type="checkbox"/> Number of Modalities  | _____   |
| <input type="checkbox"/> Presets           | <input type="checkbox"/> BNR                   | <input type="checkbox"/> User Modifiable       | _____   |
| <input type="checkbox"/> Safety            | <input type="checkbox"/> Soundhead Frequencies | <input type="checkbox"/> Quality               | _____   |