



The science of hair growth.

Warranty Service Form

To quickly process your request please include this form with your HairMax

Name: _____

Address: _____

City: _____

State/Province: _____ Zip: _____ Country: _____

Phone Number: _____

E-mail: _____

Purchase Date: _____ Order #: _____ Serial #* _____

*Serial number is located on the yellow sticker on the HairMax LaserComb

Return Date: _____

Where did you purchase your HairMax LaserComb?

Device Model: Pro 12 Lux 9 Advanced 7 Premium

Brief description of service requested:

We recommend that you ship your package via a trackable carrier, i.e. Fed/Ex or UPS.

Return Shipping Address:

Lexington International, LLC. - ATTN: Warranty/Repairs

777 Yamato Road, Suite 105. Boca Raton, Fl. 33431 | 1.561.417.0200