

## Bow Report

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Young artist name

Date of rehair or visit to shop: \_\_\_\_\_

Name of shop: \_\_\_\_\_

Phone number of shop: \_\_\_\_\_

Condition report on bow (must be filled out by archetier)  
(wear to frog or wrapping, condition of tip, warping of stick, etc.):

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Name of archetier: \_\_\_\_\_

Signed (archetier) \_\_\_\_\_