

**IMPORTANT!**

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Thank you for purchasing the Achiever golf swing analyzer. Please complete and return the following form immediately, by doing so, your Achiever will be officially registered with Focaltron Corporation. The additional information requested will help us understand our customers. Your assistance is greatly appreciated.



1.

First Name \_\_\_\_\_ Initial \_\_\_\_\_

Last Name \_\_\_\_\_

Title \_\_\_\_\_

Company \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Website: \_\_\_\_\_

Email: \_\_\_\_\_

2. Achiever Model # \_\_\_\_\_

3. Serial # \_\_\_\_\_

4. Date of Purchase: \_\_\_\_\_

5. Price Paid: \_\_\_\_\_

6. Purchase Source:

Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Address \_\_\_\_\_

7. Who will be the Primary User of the Product? (check all that apply)

- 01. Golf Shop sales person/employee
- 02. PGA Member
- 03. PGA Apprentice
- 04. College Golf Coach

- 05. High School Golf Coach
- 06. Golf Instructor
- 07. Club Fitter, Certified
- 08. Club Fitter, Non-Certified
- 09. Other \_\_\_\_\_

8. What will the product be used for?

(check all that apply)

- 01. Club Fitting
- 02. Teaching
- 03. Practicing
- 04. Entertainment
- 05. Research and Development
- 06. System Integration
- 07. Exhibition Promotion Tool
- 08. Golf Game Contest
- 09. Other \_\_\_\_\_

9. Where will the product be used?

(check all that apply)

- 01. Retail Golf Shop
- 02. On-course Pro Shop
- 03. Indoor Practice Center
- 04. Outdoor Practice/Driving Range
- 05. Golf School/Academy
- 06. Component Golf Shop
- 07. Original Equipment Manufacturer
- 08. Other \_\_\_\_\_

10. How did you first learn of this product? (check up to 3)

- 01. From Focaltron
- 02. From Sales Representative
- 03. From Friend
- 04. Magazine
- 05. Product Brochure
- 06. Direct Mail
- 07. Website/Internet
- 08. PGA Merchandise Show
- 09. PGA International Golf Show
- 10. Other Trade Show \_\_\_\_\_
- 11. Store Display \_\_\_\_\_
- 12. Other \_\_\_\_\_

11. What most important factors influenced your decision to purchase this product? (check up to 3)

- 01. Prior Experience
- 02. Laser Technology
- 03. Accuracy
- 04. Features
- 05. Quality
- 06. Price/Value
- 07. Graphic Display
- 08. Indoor/Outdoor capability
- 09. Size/Weight
- 10. Ease of Use
- 11. Recommendation
- 12. Other \_\_\_\_\_

12. Is this:

- 01. Your first owned
- 02. An addition, how many units do you own, \_\_\_\_\_

13. How many Achievers do you intend to purchase within the next 6 or 12 months?

- |     |            |             |
|-----|------------|-------------|
|     | 1-6 months | 7-12 months |
| 01. | 1 unit     |             |
| 02. | 2 unit     |             |
| 03. | 3 unit     |             |
| 04. | 4 unit     |             |
| 05. | 5 unit     |             |
| 06. | 6 unit     |             |
| 07. | 7 unit     |             |
| 08. | 8 unit     |             |
| 09. | 9 unit     |             |
| 10. | 10-20 unit |             |
| 11. | 21-50 unit |             |
| 12. | 50+ unit   |             |

14. Do (did) you own or use other swing analyzer or launch monitor?

Manufacturer	Model
_____	_____
_____	_____
_____	_____

15. What other swing analyzer or launch monitor did you seriously consider before selecting this product?

Manufacturer	Model
_____	_____
_____	_____
_____	_____

16. Do you have access to the Internet on a regular basis?

- 01. Yes
- 02. No

17. What kind of computer do you own? (check all that apply)

- 01. None
- 02. Personal Computer
- 03. Laptop Computer
- 04. Personal Organizer
- 05. Other \_\_\_\_\_

18. Any Comments regarding the Achiever would be greatly appreciated.

\_\_\_\_\_  
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