

USE & CARE INSTRUCTIONS

1. The Tempur-Pedic Swedish Mattress™ may be folded with the TEMPUR® side in (the top side of the mattress) to make it easier to move. Do not try to force a folded mattress to lay flat if it is delivered during very cold weather (below 50° F). It may take a few hours, depending on the temperature of the room in which it is placed, but the mattress will naturally unfold as it warms up.

2. This mattress is designed for use with a firm, wood, completely flat, non-spring foundation. FAILURE TO USE SUCH A FOUNDATION WITH THE MATTRESS WILL VOID YOUR TEMPUR-PEDIC SWEDISH MATTRESS WARRANTY AND ALL OTHER WARRANTIES, WHETHER EXPRESS OR IMPLIED, INCLUDING, WITHOUT LIMITATION, THE IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE. Unless you currently have a firm, wood, completely flat, non-spring foundation, you should not use your existing foundation with the mattress.

3. Remember that the Tempur-Pedic Swedish Mattress is sensitive to temperature and humidity. In rooms of 65° Fahrenheit or less, the mattress will become somewhat firmer. However, it will readily warm and respond to your body temperature when you lie on it. Due to the temperature-sensitivity of the material, we do not recommend using an electric blanket or heating pad with our mattress. Prolonged contact with these items can impair the unique properties of TEMPUR pressure-relieving material.

4. To experience the full pressure-relieving effect of the TEMPUR material, do not use a mattress pad or mattress cover of any type – only standard sheets. Our dust-mite resistant cover provides all the protection that the mattress needs. You never have to flip or rotate the Tempur-Pedic Swedish Mattress.

5. Like any new bed, it may take a while to become accustomed to the unique feeling of the new Tempur-Pedic Swedish Mattress. Most people are very comfortable on the first night. Others, however, may need a few nights to adjust to the unique feeling of TEMPUR material.

6. The mattress may have a slight odor remaining from our unique manufacturing process. All polyurethane-based materials have this characteristic. This is normal and completely harmless. Because of the extreme high density of the TEMPUR material, it may take a few days for the odor to fully dissipate.

7. The cover on the *Classic* and the *Deluxe* mattress is zippered on four sides for easy removal and washing. We recommend a cold temperature setting for machine washing and a cool setting for machine drying. Air-drying is best. Do not “over-dry” the cover and do not use chlorine products or harsh stain removers of any kind. Never wash the TEMPUR material.

PLEASE NOTE: THE COVER ON “THE CELEBRITYBED by TEMPUR-PEDIC™” IS NOT REMOVABLE AND CAN NOT BE WASHED.

If you have questions or concerns regarding the new mattress, please contact our Customer Service Department at **1-800-821-6621** or send email to **customerservice@tempurpedic.com**

20-YEAR WARRANTY REGISTRATION

Please complete and return this form by mail or register online at www.tempurpedic.com. If mailing, please fold and tape closed.

Mr. Mrs. Ms. Date of purchase _____
First name _____ M.I. _____
Last name _____
Address _____
City _____ State _____ Zip _____
Home phone _____ Work phone _____
E-Mail _____

Please choose only one answer.

1. What influenced you to buy?

- Convenient payment options Immediate and timely delivery offered
 Received a free special offer via the mail Convenient store location
 Salesperson recommendation Friends or relative's recommendation
 Medical professional recommendation Slept on bed in hotel

2. Why did you buy a bed?

- Needed a smaller bed Needed a larger bed Did not have a bed
 Sleep problems Back problems Got married
 Bought a home Redesigned a new bedroom Spare bed for guest room
 Child moves to a larger bed

3. Where did you hear about us?

- Spouse Relative Friend
 Medical professional Salesperson Magazine
 TV Radio Newspaper
 In-store video In-home video Mail
 Internet Brochure & product information received

4. Which best describes your family income?

- \$25,000-\$50,000 \$50,000-\$75,000 \$75,000-\$100,000 more than \$100,000

5. Who made the primary decision in purchasing your mattress?

- Male Female Both

6. What are the age ranges of the primary users of the bed?

- Under 25 25-35 36-44 45-55 56-64 65+

7. What size mattress did you purchase?

- Twin Twin long Double Double long
 Queen Dual queen King CA king

8. When will you be purchasing a second mattress/bed?

- Within 12 months Within 24 months No plans

9. What is your marital status?

- Single Married Divorced Widowed

10. Where did you buy your mattress?

- Directly from Tempur-Pedic Retail store Medical health professional

If from retail store, please specify _____

11. How long did you spend gathering information and shopping for this purchase?

_____ Weeks _____ Months

12. How satisfied were you with the sales services you received?

(1 being very dissatisfied, 10 being very satisfied)

- 1 2 3 4 5 6 7 8 9 10

13. What source of information helped you the most in selecting your product?

- Spouse Relative Friend Medical professional
 Salesperson Magazine TV Radio
 Newspaper In-store display In-home video Mail
 Brochure & product information received Internet

14. What other brands did you consider before making your purchase?

- Simmons Sealy Serta Spring Air King Koil Only Tempur-Pedic

Other _____

Please rate the following with respect to your sales experience:

15. Level of professionalism (1 being very unprofessional, 5 being very professional)

- 1 2 3 4 5

16. Level of courteousness (1 being very discourteous, 5 being very courteous)

- 1 2 3 4 5

17. Level of product knowledge

(1 being very unknowledgeable, 5 being very knowledgeable)

- 1 2 3 4 5

18. What service level of delivery did you choose?

- Express (10 days, dropped on doorstep)
 Full service (21 days, in-home delivery and set up)

19. Within the bounds of the above-referenced delivery times, was your order delivered in a timely manner?

- Yes No. If “no”, please explain _____

20. Name of delivery service, if known. _____

21. Did your delivery personnel set up the product to your satisfaction?

(only if full service)

- Yes No. If “no”, please explain _____

22. Were the delivery personnel professional and courteous?

- Yes No. If “no”, please explain _____

DETACH WARRANTY AND TAPE CLOSED BEFORE MAILING