BODYFACT

WITHDRAWAL FORM

(For notifying withdrawal from a consumer contract)

Please complete and return this form only if you wish to exercise your statutory right of withdrawal as a consumer.

Trader details

Company name: BODYFACT Kft.
Registered office and postal address: 1029 Budapest, Csatlós utca 3., 1/3 – Hungary
E-mail: return@bodyfact.eu
Website: www.bodyfact.eu

I, the undersigned consumer, hereby notify you that, in accordance with the applicable legislation, I withdraw from the contract for the sale of the following product(s).

PRODUCT DETAILS

Product name:.....

Quantity: .....

Product name: .....

Quantity: .....

Product name: .....

Quantity: .....

ORDER DETAILS

Order number: .....

Date of order: .....

Date of receipt of the product: .....

CONSUMER DETAILS

Name: .....

Address: .....

E-mail address: .....

Telephone number (optional): .....

Bank account number for reimbursement of the purchase price:.....

DECLARATION

By signing this form, I declare that I have read and understood the General Terms and Conditions of BODYFACT Kft.

I acknowledge that:

- the right of withdrawal may be exercised within 14 days from the date on which the product is received;
- after notifying the withdrawal, I must return the product without undue delay and no later than 14 days thereafter;
- I bear the direct cost of returning the product;
- the trader is not obliged to accept parcels sent cash on delivery or with postage due;
- I am liable for any diminished value of the product resulting from handling the product beyond what is necessary to establish its nature, characteristics and functioning;
- in certain cases, the right of withdrawal may be excluded or limited by law, in particular in the case of sealed products which are not suitable for return after opening due to health protection or hygiene reasons.

Reason for withdrawal (optional):

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Date: .....

Consumer's signature: .....