

Claim or withdrawal form

Please complete and return this form only if you wish to make a claim for goods or if you wish to withdraw from the contract as a consumer in accordance with Article V of the Terms and Conditions.

Recipient: INSTITUTE OF NATURAL REGENERATION s.r.o.
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I hereby give notice that I hereby claim: (please circle one of the options offered)

A) Complaint

B) Withdrawal from the contract within 14 days of or before delivery of the goods

Please identify here the contract, order number, goods ordered

Reason(s) for cancelling the contract (optional) or for making a claim (mandatory - you must describe the defect of the goods claimed):

Please indicate the date of receipt of the goods,

Your name and surname/entity name:

Your permanent address:

Date of birth/ID number:

Date of submission of this form:

Your signature: