

WITHDRAWAL FORM

Please complete and return this form only if you wish to cancel the contract.

*For the attention of: The Kooples Customer service
11, rue de Prony – 75017 Paris:
servicelients@thekooples.com*

I/We (*) hereby notify you of my/our (*) withdrawal from the contract for the sale of the goods indicated below:

Product name:

Ref:

Quantity:

Ordered on(*)/received on(*):

Customer(s) name:

Customer(s) address:

Date:

Customer(s) signature (only if this form is notified on paper):

(*) Delete as applicable.