

Pursuant to art. 49 paragraph 4 letter h, complete and return this form
only if you wish to withdraw from the contract

Spett.le
Rewind S.r.l.
Via Lombardia, 2/4
35020 - Saonara (PD)
P.Iva e C.F.: 04687510281
e-mail: shop@rewindsrl.it
pec: rewindshoes@pec.it

Object: Exercise of the right of withdrawal

Here with the undersigned _____

notifies his withdrawal from the contract concluded for the purchase of the following Products:

Order of ____ : ____ : _____ Received the ____ : ____ : _____

Buyer's Name: _____

Street / Square: _____

City: _____ Province: (_____)

Postal Code: _____

Phone: _____

Email address associated with the account with which the order was placed:

_____ @ _____

Reason for return: _____

Date ____ : ____ : _____

Signature _____