**WITHDRAWAL FROM CONTRACT FORM**

please complete and send this form only if you wish to withdraw from the contract

To

NutriWorks s.r.o.Laborecká 2875/17

Company ID: 56689519, TAX ID: 2122393592

**Phone:** +421 949 241 251

**E-mail:** info@denisadzuganova.com

I hereby inform you that I am withdrawing from the contract for the following goods /

service:

**Order Number**\*:

**Date of Order\***:

**Date of Receipt\***:

**Name\***:

**Address of the Buyer\***:

**I wish to have the amount for the returned goods / service refunded\*:**

to the bank account / IBAN /:

by check to the address:

|  |  |
| --- | --- |
| **Date**\***:** | **Signature of the Buyer:** *(only if this form is submitted in paper form)* |

\*required information