Model Withdrawal Form

(*) Delete as appropriate

To:

(Complete and return this form only if you wish to withdraw from the contract)

ZIPPS Skiwachse GmbH
Frank Zipp
Waldernbacher Straße 7
D - 65620 Waldbrunn (Westerwald)
Germany
Fax: +49/6479/911657
Email: shop@skiwachs.com
I/We* hereby give notice that I/we* withdraw from my/our* contract of sale of the following goods (*)/for the provision of the following service (*),
ordered on (*) / received on (*):
Name of consumer(s):
Address of comsumer(s):
Signature of consumer(s), only if this form is notified on paper:
Date: