Returns Form

Please complete the form below and include with your returned items

Contact Information:

|  |  |
| --- | --- |
| Date: |  |
| First name: |  |
| Last Name: |  |
| Email Address: |  |
| Postal Address: |  |
|  |  |
| Phone Number: |  |
| Order number: |  |

REASON FOR RETURN:

|  |
| --- |
| Please note that we may contact you to gather more information about your return request. |

Please note that reasons such as “changed my mind”, or “I don’t want it anymore” will not be considered grounds for a return