

Return Form

We want you to be completely satisfied with every product you purchase from us. All returns must be initiated within 14 days of the date of original shipment. Our return policy states that we will accept any full-sized product for a return, as long as it is at least 50% full and received within 30 days of initial purchase from Farmaesthetics.com. Our return address is as follows:

Farmaesthetics
Attn: Returns Department
15 Vernon Avenue
Suite 7
Newport, RI 02840

Please fill out the following form, print, and include with your return in the box

I am returning the following product(s):
I would like to receive a:
□ Replacement□ Refund
Order #:
First name:
Last name:
Email:
Phone #:
Reason for return: