



RETURN FORM

(please fill everything in CAPITAL letters)

FIRST & LAST NAME: _____

E-MAIL: _____

PHONE: _____

ORDER NUMBER: _____

WHAT ARE YOU RETURNING?

ITEM NAME	SIZE & COLOR	REASON

WHAT DO YOU WANT TO EXCHANGE?

ITEM NAME (+ COLOR)	OLD SIZE	NEW SIZE

Send your return to:

RESPECT COLOR - RETURNS
Santhorstlaan 53
2242 BE Wassenaar
The Netherlands