



RETURNS FORM

Not quite right? We are sorry to hear.
Please fill in this form and include this inside your returns parcel.

Return Address:

KOBA SWIM LTD
305 WESTERN BANK
SHEFFIELD
S10 2TJ

Your name: _____

Date of order: _____

Order number: _____

Email address: _____

(Please note: any items received with the hygiene sticker removed or damaged cannot be returned & will not be refunded)

ITEM	REASON FOR RETURN*

*Reason code:

- 1 - Too small
- 2 - Too big
- 3 - Changed mind
- 4 - Faulty/damaged
- 5 - Incorrect item sent
- 6 - Other (please specify)

Exchange:

I wish to exchange my item/s: _____

for _____

(Please specify the name, colour and size of the item you wish to return & the same details for the product/s you wish to exchange for)