



This Adjustment Policy applies to purchases made from Toxic Angelz Bikinis. All adjustment items must be accompanied by the packing slip and customs documents (if applicable).

Non-Toxic Angelz Bikinis branded items purchased cannot be sent in for an adjustment or add-ons.

Mail your items back to Toxic Angelz Bikinis to this address:

**Toxic Angelz Bikinis
75 Executive Ave, Ste 6
Rohnert Park, CA 94928**

ADJUSTMENT POLICY

All competition bikinis, figure suits, posing suits and apparel are final sale and non-refundable. Deposits are non-refundable and do not expire. We do adjustments and add-ons for Toxic Angelz Bikinis brand suits only.

Customer is responsible for the shipping costs to and from Toxic Angelz Bikinis.

ADJUSTMENTS OR ADD-ONS

All items sent in for adjustments or add-ons MUST BE WASHED AND CLEAN or there will be a cleaning fee of **\$30.00 USD** charged to the client's payment provided.

FOR ANY PURCHASES, ADD-ONS, OR ADJUSTMENTS WITHOUT THE PACKING SLIP OR ORDER CONFIRMATION EMAIL WILL NOT BE ACCEPTED.

SERVICE POLICY & DIRECTIONS

Complete the form and include this sheet with any items you are sending back for service.

Client Information

Name: _____ Show Date: _____

Shipping Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Invoice Number (if applicable): _____

Please check the following service needed:

() Switch out TOP connectors (\$10) - Please indicate which TOP connector you are switching out for: _____

() Switch out BOTTOM connectors (\$10) - Please indicate which BOTTOM connector you are switching out for: _____

() Switch out MIDDLE connectors (\$5) - Please indicate which MIDDLE connector you are switching out for: _____

() Add BACK connector (\$5) - Please indicate which BACK connect you are adding: _____

() Remove BACK connector (\$5)

() Hip bone (bottom) adjustment (FREE) - Provide your current hip bone measurement: _____

*****The following service charges do not include the cost of the new connectors being replaced with.*****

Customer is responsible for shipping costs. Please select shipping:

() First Class (\$10)

() Overnight (\$50)

Credit Card Authorization Form

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled.

Credit Card Information
Card Type: <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX <input type="checkbox"/> Other _____
Cardholder Name (as shown on card): _____
Card Number: _____
Expiration Date (mm/yy): _____
Cardholder ZIP Code (from credit card billing address): _____

I, _____ (print name), authorize Toxic Angelz Bikinis to charge my credit card above for agreed upon purchases.

Customer Signature _____

Date _____