

Return Form



La Maison del Cabello
Diseminado Vallonga, 5A
03114, Alicante, España
(+34) 629 42 60 98

Name and Surname:

Address:

ORDER NUMBER

ARTICLE

COLOUR

PRECIO

REASON

_____	_____	_____	<input type="radio"/>
_____	_____	_____	<input type="radio"/>
_____	_____	_____	<input type="radio"/>
_____	_____	_____	<input type="radio"/>
_____	_____	_____	<input type="radio"/>
_____	_____	_____	<input type="radio"/>

Reason for Return: Indicate in the box the code with the reason for return

- | | | |
|--|---------------------------------------|---|
| <input type="radio"/> 1 Not suit me | <input type="radio"/> 2 Not my colour | <input type="radio"/> 3 Not the size I need |
| <input type="radio"/> 4 Not the length | <input type="radio"/> 5 Defective | <input type="radio"/> 6 Not what I ordered |

If you paid by cash on delivery or bank transfer, please provide your account number

1 Complete this form

Please indicate the reason for return for each item

2 Prepare the package

Do not forget to include this form inside

3 Make the return

Send us the package to the address of our company

4 Receive the refund

Within 15 working days from the day we receive the package

(We do not exchange products. You must return the product and buy the desired model and colour again)