**Form for Withdrawal**

(Complete this form and return it only when you want to revoke the agreement)

* + - To: K.O.I Kanpai

 Slangenburgstraat 5

 4834KV Breda

 Tel: 0634403997

 Email: info@koikanpai.com

I/We\* hereby inform you that I/we\* wish to revoke our agreement on

 The sale of the following products: [specification of the product]\*

 The delivery of the following digital content [specification of the digital content]\*

 The performance of the following service [specification of the service]\*:

|  |  |
| --- | --- |
| Order Date (DD/MM/YYYY) |  |
| Received Date (DD/MM/YYYY) |  |
| Order Number |  |
| Customer Name |  |
| Customer Address |  |
| IBAN Bank Account |  |

 Consumer’s signature (only when this form is submitted on paper)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*) Delete and/or complete where appropriate.