

# REFUND/EXCHANGE FORM

## ORDER / CONTACT INFORMATION

Date of Order:      /      /      Order #: .....

Full Name: ..... Email: .....

Street Address: ..... Suburb: ..... State: .....

Postcode: ..... Phone #: .....

## RETURNING ITEMS

Product Name	Colour	Size	Reason Code

Reason codes: 1. Too big - 2. Too small - 3. Change of mind - 4. Looks different to site - 5. Faulty - 6. Wrong item received

## REFUND / EXCHANGE

I would like to:       Exchange       Refund

### Exchange for:

Product Name ..... Colour ..... Size .....

Product Name ..... Colour ..... Size .....

## PAYMENT METHOD

Credit Card       PayPal       Afterpay       ZipPay

Please note, all returns will be refunded to your original payment method.

## POST YOUR ITEM(S) TO:

PO Box 554, Port Adelaide, SA 5015