

Withdrawal Form

If you wish to withdraw from the contract, please complete and return this form to:

Cinevision-Solutions GmbH
Mathias-Brüggen-Straße 8
50829 Köln
Germany

I/we hereby give notice that I/we withdraw from my/our contract of purchase of the following goods:

Please state the ordered goods for which you wish to exercise your right of withdrawal ¹

[Empty text box for ordered goods]

[Empty text box for ordered goods]

[Empty text box for ordered goods]

[Empty text box for ordered goods]

[Empty text box for ordered goods]

[Empty text box for ordered goods]

Total price of goods:

[Empty text box for total price of goods]

Ordered on:

[Empty text box for ordered on date]

Received on:

[Empty text box for received on date]

Your address:

Customer number

[Empty text box for customer number]

Name

[Empty text box for name]

Street

[Empty text box for street]

Postcode

[Empty text box for postcode]

City/Town

[Empty text box for city/town]

Date

[Empty text box for date]

Signature

[Empty text box for signature]