

Withdrawal form

- (Only complete and return this form when you want to cancel the agreement)

— To:
Dutch Accent
Berenstraat 41
1016 GG, Amsterdam, NL
info@dutch-accent.nl
+31 20 420 21 20

— I / We (*) hereby inform you that I / We (*) revoke our agreement relating to the sale of the following goods / provision of the following service:

() Delete what is not applicable.*

— Date of purchase (DD-MM-YYYY) :

— Ordernumber:

— Delivered on (DD-MM-YYYY):

— Name/Names consumer(s):

— Address consumer(s):

— IBAN Bankaccount number:

— Signature of the consumer(s) (only if this form be submitted in paper)

Date (DD-MM-YYYY):