



Return and Exchange Form

Originally Purchased by:☐ Address Change

Name: _____

Address: _____

(City) _____ (State) _____ (Zip) _____

Phone: (_____) _____ (_____) _____
(Daytime) (Evening)

Email Address: _____

Send Refund or Exchange to: (If different from left)

Name: _____

Address: _____

(City) _____ (State) _____ (Zip) _____

Phone: (_____) _____ (_____) _____
(Daytime) (Evening)

Email Address: _____

Please select one of the following options:☐ Exchange for another item(s).☐ Refund only

Returns

 In the form below please indicate the item(s) you are returning

Item Name	Price	Return Reason

Exchanges

Item Name	Price	Size	Additional Information

Method of Payment:

Credits will be issued in the same manner as payment was made.

Signature: _____