

HOW TO USE THE WITHDRAWAL FORM?

IF YOU HAVE PLACED AN ORDER ON THE MYORIGINES WEBSITE AND WISH TO WITHDRAW FROM YOUR CONTRACT:

1 COMPLETE THE FORM

Please fill in all the fields on the form provided.

Ensure you provide your order number and the list of products concerned by the return.

2 INCLUDE IT IN THE PARCEL

Place this document inside your return parcel, along with the products concerned.

3 SEND BACK YOUR PARCEL

Return your parcel to the following address:

S.A.S DIVABOX
SERVICE RETOUR CS 14001
20700 AJACCIO CEDEX 9

FOR A WITHDRAWAL, THE COST OF SENDING THE RETURN PARCEL IS YOUR RESPONSIBILITY. KEEP PROOF OF THE PARCEL DEPOSIT WITH THE CARRIER. THE BUYER SHALL BEAR ANY RISK ASSOCIATED WITH THE RETURN OF A PRODUCT.



YOU HAVE A PERIOD OF **14 DAYS FROM** THE DATE OF RECEIPT OF YOUR ORDER TO EXERCISE YOUR LEGAL RIGHT OF WITHDRAWAL AND RETURN THE CONCERNED PRODUCTS (IN ACCORDANCE WITH ARTICLES L.121-20 AND FOLLOWING OF THE CONSUMER CODE).

RETURNS OF PRODUCTS SENT BEYOND THE CONTRACTUAL WITHDRAWAL PERIOD WILL NOT BE ACCEPTED.



All products must be returned **in perfect condition, unopened, unused, accompanied by their original packaging, accessories, instructions, etc.**

We reserve the right to refuse any returns that do not meet the above conditions.

FOR FURTHER INFORMATION, PLEASE CONTACT THE CUSTOMER SERVICE

02 070 970 015

WITHDRAWAL FORM

TO BE PRINTED, COMPLETED, SIGNED, AND INCLUDED IN YOUR RETURN PARCEL.

By completing this form, I am withdrawing from the contract for the sale of the following product(s)* **(tick the box and fill in the names of the concerned products in the fields below).**

1 _____
2 _____
3 _____
4 _____
5 _____
6 _____
7 _____
8 _____

More than 8 products? You can list them on the back of the form.

I WOULD LIKE A REFUND

JE SOUHAITE UN BON D'ACHAT

ORDER NUMBER* : _____

RECEIVED ON* : _____

YOUR NAME* : _____

YOUR ADDRESS* : _____

POSTCODE : _____ CITY : _____

DATE : _____

SIGNATURE* : _____

*MANDATORY FIELDS