



## Withdrawal Form

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

Wiborg Shaving  
Florian Arnold  
Bei den Wörden 18b  
13437 Berlin  
Germany

Telefax: +49 (0)30 40910081  
Email: info@wiborgshavingbrushes.com

I/We\* hereby give notice that I/we\* withdraw from my/our\* contract of sale of the following goods:

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Ordered on\*:  
Received on\*:

Name of the consumer:

Address of the consumer:

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Date

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Signature of the consumer  
(only for communications on paper)

\* Delete as appropriate.