WITHDRAWAL FORM

(this form should be completed and returned only if you wish to withdraw from the contract)

	Place, date
Name and surname of the Consumer(s)	
	FIDELI SP. Z .O.O.
	ul. Żeromskiego 16 64-200 Wolsztyn
	e-mail: cs@estika.eu
DECLARATION OF WITHDRAWAL FROM	M THE CONTRACT
from the contract for the sale of the following services (*):	hereby give notice of my/our (*) withdrawal g goods (*) / for the provision of the following
•	
•	
•	
•	
Date of conclusion of the contract (*) / of re	ceip (*):
Bank account number for the refund (**):	
Account holder :	
••••••	
Signature(s) of the Consumer(s)	
(only if this form is sent in paper version) (*) Delete as appropriate	
(**) If different from the bank account from	which the payment was made