

WITHDRAWAL FORM

(fill in and send this form if you wish to withdraw from the Agreement)

To: **X-BIONIC® SPHERE a.s.**, with its registered office at Dubová 33/A, 931 01 Šamorín,
Company ID: 46 640 134, registered in the Commercial Register of District Court
Trnava, Section: Sa, file No. 10684/T

I / We hereby declare* that I / we withdraw from the Agreement for the provision of these goods / services*:

.....
.....

Date of the Agreement / Date the goods were received*

.....

Name and surname*

.....

Invoicing address*

.....

Email address*

.....

Signature* (only in case this form is submitted in paper form)

.....

Date

***MANDATORY INFORMATION**