|  |
| --- |
| **FORMULARIO DE DESISTIMIENTO** |
|  |
| *(Sólo debe cumplimentar y enviar el presente formulario, si desea desistir del contrato)* |

A la atención de:

|  |
| --- |
| MEDINA VENTURA, ESTHER |
| C/ ANDRES CAMPOS, 22, 46117, BETERA, VALENCIA |
| medina@esteticaesther.com |
| https://esteticaesther.com/ |

|  |  |  |
| --- | --- | --- |
| D/Dña. |  | , mayor de |
| edad, con D.N.I. |  | , y domicilio a efectos de notificaciones en |
|  | de |  | provincia |
| de |  | C.P. |  |  |
|  |
| Por la presente le comunico/comunicamos(\*), que desisto de mi/desistimos de nuestro(\*)contrato de venta del siguiente bien/prestación del siguiente servicio(\*): |
|  |
|  |
|  |
| Recibido el día |  |  |
|  |
| *(\*) Táchese lo que no proceda* |
|  |
| En |  | a |  | de |  | de 20 |  |  |
|  |
| Fdo.: |  |  |
|  |

|  |
| --- |
| **WITHDRAWAL FORM** |
|  |
| *(You only have to fill in and send this form if you wish to withdraw from the contract)* |

Addressed to:

|  |  |
| --- | --- |
| MEDINA VENTURA, ESTHER |  |
| C/ ANDRES CAMPOS, 22, 46117, BETERA, VALENCIA |  |
| medina@esteticaesther.com |  |
| https://esteticaesther.com/ |  |

|  |  |  |
| --- | --- | --- |
| Mr./Ms.. |  | , of legal age |
|  With ID number. |  | , and addressed for notification purposes in  |
|  |  |  | Province of |
|  |  | Zip Code |  |  |
| Hereby I inform that I withdraw from the following product or service purchase contract:  |
|  |
|  |
|  |
|  |
| Received on  |  |   |
|  |
| *(\*) Táchese lo que no proceda* |
| Place:  |
| Date: |
| Signature |  |  |
|  |