**Form for withdrawing from the contract**

(fill in this form and send it back only if you want to withdraw from the contract. The form shall be printed, signed and sent scanned to the e-mail address below, or put it in the shipment with the returned goods).
You can send the returned goods, for example, by courier to the address:
Na Roli 2148/29
Jablonec nad Nisou 466 01
Czech Republic
to the person: Pavel Hataš
e-mail: info@flixflox.cz
tel:+420 725 191 721

I hereby declare that, in accordance with Ac No. 102/2014 Coll. on consumer protection during the sale of goods or provision of services on the basis of a contract concluded at a distance or a contract concluded outside the seller's premises and on amendments and supplements of certain laws, as amended (hereinafter referred to as the “Act on Consumer Protection in Distance Selling”), I withdraw from the contract:

**Addressee (seller):** www.FLIXFLOX.cz
Company: Barbora Hatašová
Registered office: Na Roli 2148/29
 Jablonec nad Nisou 466 01
 Česká republika
Company ID/Tax ID: 02575531/CZ8555203272
E-mail address: info@flixflox.cz
Tel.: +420 725 191 721
**Buyer:**

|  |  |
| --- | --- |
| Title, first name and surname |  |
| Addressa: |  |
| Telephone number and e-mail address: |  |
| Order and invoice number: |  |
| Order date: |  |
| Date of receiving goods: |  |
| Product that I am returning or filing a complaint for (name and code) |  |
| As a customer of the seller, I request that my withdrawal from the contract be handled in the following way: |  |
| I request to return the money to a bank account (IBAN)/in another way. |  |

Notice for consumers:
According to §10 (4) of the Act on Consumer Protection in Distance Selling, thee seller is entitled to demand reimbursement from the consumer for the reduction in the value of the goods, which arose as a result of such handling of the goods, which is beyond the scope of the handling needed to determine the properties and functionality of the goods.
 Date: ..................................................................

 Signature\*: ..................................................................

(\* fill in only if you send the form in printed form by postal services)