## **Model withdrawal form**

(complete and return this form only if you wish to withdraw from the contract)

То:	
Robert Schindele Sigrun Kerschus Kicking 18 3122 Gansbach Austria	
Fax: +43-2753-2 E-Mail: info@mir	
I/We (*) hereby of following service	give notice that I/We (*) withdraw from my/our (*) contract of sale of the following goods (*)/for the provision of the (*):
Ordered on (*) /	received on (*)
Name of consum	ner(s)
Address of const	umer(s)
Date	Signature of consumer(s) (only if this form is notified on paper)
(*) Delete as appropriate	