

RETURNS FORM

Please print and complete this form and return with the gift within 14 days of the date of despatch. Please note, we cannot accept returns without this information.

Order reference number (from our confirmation e-mail) _____

Date order placed _____

YOUR DETAILS

First name _____

Surname _____

Address _____

Address _____

Postcode/Zip code _____

Country _____

RECIPIENT DETAILS

First name _____

Surname _____

Address _____

Address _____

Postcode _____

Item ordered _____

Reason for return _____

Date of return _____

Please return to: the gift of oil . Bolton Enterprise Centre . Washington Street . Bolton . BL3 5EY



the gift of oil
The Enterprise Centre
Washington Street
Bolton BL3 5EY
t: 01204 559555
mail@thegiftfoil.co.uk
www.thegiftfoil.co.uk