



## WITHDRAWAL FORM

(This form must only be completed and sent if you wish to withdraw from the contract)

For the attention of

**MOVILIDAD AMPLIADA, SL**

Avenida Menendez Pelayo, 25 2B - 28009 Madrid

Telephone: +34 91 570 16 82

email: [info@accessiblemadrid.com](mailto:info@accessiblemadrid.com)

I hereby inform you that I withdraw from my contract of sale of the following good or goods with

Product name

Product name

Product name

Included in the Invoice number

purchase date

– Belonging to order number

purchase date

– Name of the buyer/s

– Address of the buyer/s

If the shipping address is different from that of the buyer, you must fill in the following information:

- Recipient's name

- Recipient address

Signature of the consumer/s  
(Only if this form is submitted on paper)

Date

**Avenida de Menéndez Pelayo, 25 2B – 28009 MADRID – Spain**

**Tel: +34 91 570 16 82**

**[www.accessiblemadrid.com](http://www.accessiblemadrid.com)**