

# CANCELLATION FORM

This form is filled out and returned only if the right of cancellation is valid.

To:

MasterCubeStore ApS

Randersvej 26

6700 Esbjerg

Denmark

E-mail: [info@mastercubestore.dk](mailto:info@mastercubestore.dk)

- I hereby state that I wish to make use of my right of cancellation in regards to my purchase agreement about the following products (please write the products reference and name):

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- Order date: \_\_\_\_\_
- Order reference: \_\_\_\_\_
- Ordered by (name): \_\_\_\_\_
- Customer address: \_\_\_\_\_
  
- Customer signature: \_\_\_\_\_