



PartyVikings ApS
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## STANDARD CANCELLATION FORM

This form should only	be completed and returned i	f the right	of withdrawal is exercised
I hereby give notice that I wish to exercise my right of withdrawal in connection with my purchase agreement for the following goods/services:			
Date of order:			Date of receipt:
Order number:			
Name			
Address			
Postcode	City		
Dato	Signature (only if submitted on paper)		