

WEB SITE CUSTOMER REFUND/EXCHANGE FORM

Swimwear Galore will accept INTERNET PURCHASES for exchange or refund. Please return goods **UNWORN** with swing tickets still attached. No returns will be accepted after 14 days from purchase for Australian orders and 30 days for International orders. The customer is responsible for any postage fees for returns to Swimwear Galore. We will pay postage back to you only. If goods have been worn, and are believed to be faulty, please fill in the CLAIM FORM on the next page.

CUSTOMER DETAILS:

NAME _____
 ADDRESS _____
 _____ STATE _____ P/C _____
 TELEPHONE _____
 ORDER NO. _____ PURCHASE DATE _____

WOULD YOU LIKE TO EXCHANGE ITEMS? PLEASE FILL IN THE FOLLOWING:

EXCHANGE DETAILS:

RETURNING

CODE _____	COLOUR _____	SIZE _____	\$ _____
CODE _____	COLOUR _____	SIZE _____	\$ _____
CODE _____	COLOUR _____	SIZE _____	\$ _____

IN EXCHANGE FOR

CODE _____	COLOUR _____	SIZE _____	\$ _____
CODE _____	COLOUR _____	SIZE _____	\$ _____
CODE _____	COLOUR _____	SIZE _____	\$ _____

If the total of your exchanged goods is **MORE** than the cost of your original goods, please provide your Credit Card details.

NAME _____

VISA* M/C* NUMBER _____

EXPIRY _____ *please note we only accept VISA and Mastercard

If the total of your exchanged goods is **LESS** than the cost of your original goods, we will provide a refund for that amount to the Credit Card you used to purchase.

WOULD YOU LIKE TO REFUND ITEMS? PLEASE FILL IN THE FOLLOWING:

REFUND DETAILS:

RETURNING

CODE _____	COLOUR _____	SIZE _____	\$ _____
CODE _____	COLOUR _____	SIZE _____	\$ _____
CODE _____	COLOUR _____	SIZE _____	\$ _____

COMMENTS _____

Refunds are provided for **GOODS ONLY** postage will not be included.

WEB SITE CUSTOMER CLAIM FORM

If the goods have been WORN and you believe there to be a manufacturing fault, please fill out this CLAIM FORM and post with item. Swimwear Galore will then endeavour to resolve the claim with the supplier on your behalf.

CUSTOMER DETAILS:

NAME _____

ADDRESS _____

_____ STATE _____ P/C _____

TELEPHONE _____

ORDER NO. _____ PURCHASE DATE _____

**PLEASE FILL IN THE FOLLOWING DETAILS REGARDING THE FAULTY ITEM
 (RE-PRINT FORM FOR EXTRA ITEMS)**

ITEM DETAILS:

BRAND _____ BARCODE _____

ITEM NAME _____ COLOUR _____ SIZE _____

ORDER NO. _____ PURCHASE DATE _____ PRICE _____

FAULT DETAILS:

(Please tick) STITCHING BROKEN CLIP IMPERFECT FIT

LYCRA BREAKDOWN COLOUR FADED OTHER

FAULT AREA _____

CUSTOMER WEAR: TOTAL TIMES WORN _____

WORN IN (Please tick) POOL SPA OCEAN

METHOD OF CARE (Please tick)

RINSED HAND WASHED MACHINE WASHED

OTHER _____

DETERGENT USED - TYPE _____

CUSTOMER SIGNATURE DATE

OFFICE USE ONLY:

REPAIRED REPLACED REJECTED

CREDITED

SUPPLIER STYLE NO: _____ COST PRICE _____

POSTAGE _____ AUTH NO: _____