

Cancellation form

To:

Trevernovum
Werner Eiden
Caspar-Olevian-Str. 111
54295 Trier

I/we hereby revoke the contract concluded by me/us dated _____ for the provision of the following services (*):

for the delivery of the following goods or software (*):

Name of the consumer(s):

Postal address of the consumer(s):

Signature(s) of the consumer(s) (only in the case of notification on paper)

Date: _____

(*) Cross out where not applicable