

## Standard Withdrawal Form

(If you want to withdraw from your concluded contract please fill in this form and send it to us.)

To  
Feldenkrais Institut Wien OG  
Taborstr. 71/1a  
A 1020 Wien/Vienna  
Austria  
Tel.: +43 (0)699 1133 1043  
E-Mail: [training@feldenkraisinstitut.at](mailto:training@feldenkraisinstitut.at)

I/we (\*) hereby request the withdrawal from the contract placed by myself /ourselves (\*) for the purchase of the following goods/ the provision of the following service (\*)

ordered/dated/received on

Name of consumer(s)

Address of consumer(s)

Signature of consumer  
(only when withdrawing on paper)

Date

(\*) *delete as appropriate*