

CUSTOMER RETURNS FORM

Full Name	
Order Number	
Email Address	
Mobile Number	
eBay ID (if applicable)	
Product (include size/colour)	
Details of Return/Issue	

Signature	:																											
	_	_	_	-	_	 _	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_

Mail Back To:

PUSHYS Returns Department
PO Box 3221, Darra QLD 4076

Please Read Through PUSHYS Terms And Conditions For Returns