

Please send returns/exchanges to the following address:

Baby Bangs! HAIR+bands ° 602 East Broadway, Suite A ° Alton, Illinois 62002

Name _____

Original Order Date _____ Order Number _____

FOR RETURNS, PLEASE USE TABLE BELOW: FOR EXCHANGES, PLEASE USE TABLE BELOW:

STYLE	DESCRIPTION	REASON

Reason Codes:

1. Changed Mind 2. Didn't Like 3. Ordered Wrong Style 4. Received Wrong Style
5. Damaged/Defective 6. Other _____

If Damaged/Defective **product HAS been worn** **product HAS NOT been worn**

BILLING INFORMATION Visa Mastercard Other/Type _____

Name on Card _____

Credit Card# _____ EXP _____ CCV _____

Billing Address _____ City _____ State _____ Zip _____

Cardholder Signature _____

Phone _____ Email _____

SHIPPING INFORMATION (if different than above)

Ship To:

Name _____

Address _____ City _____ State _____ Zip _____