



USSoccerStore.com Return/Exchange Form

1632 240th Street, Harbor City, CA 90710 – (877) 538-8265

We want you to love everything you ordered! If something isn't right, please use this checklist to determine if your order qualifies for a return/exchange. If you are missing an item, received the wrong item, or there is an error with the customization on your jersey, please call (877) 538-8265 for further instructions. If not, please proceed with the checklist:

- Is the merchandise in brand-new condition, not worn or used? If returning a DVD or CD, is it still unopened and sealed inside its plastic wrap? If returning apparel, is it still plain, not customized with a name, number, or badge of any kind? **YES** ___ **NO** ___
- Do you still have all original tags, plastic wrap, box, wrench, etc. that arrived with your shipment? **YES** ___ **NO** ___
- Was the merchandise delivered to your location less than 30 days ago? **YES** ___ **NO** ___

If you answered **NO** to **ANY** of the above, please **DO NOT** attempt to return your merchandise, as we will not be able to process your return and cannot ship the items back to you.

If you answered **YES** to **ALL** of the above, please fill out the form below and mail it with your return.

Order #:	
Name:	
Address:	
Phone #:	

Reasons for Return or Exchange:

- A. Sizing: () too big or () too small B. Unsatisfied: () quality/fabric or () style/color C. Wrong Item ordered
D. Changed my mind E. Not as described F. Found it cheaper elsewhere

Circle "R" if returning for a REFUND or "X" if returning for an EXCHANGE

RETURN

	Product ID Online	Product Name	Qty	Price	Reason (write letter)
R or X					
R or X					
R or X					
R or X					

EXCHANGE

Product ID Online	Product Name	Color	Size	Qty	Price

In the event that the exchanged item is not available, I would like to receive (select one): [_] Store Credit [_] Refund

PLEASE NOTE: IF THE FOLLOWING SECTION IS NOT COMPLETED, THERE WILL BE A DELAY IN PROCESSING YOUR RETURN OR EXCHANGE

For Balance Due (shipping fee, price difference, etc.), please select one of the following options:

<input type="checkbox"/>	Permission to use Credit Card on file from original order.
<input type="checkbox"/>	Please contact me for alternate form of payment
<input type="checkbox"/>	Send money request to PayPal email:

Signature: _____ Date: _____