| January 2024 |
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| **STANDARD WITHDRAWAL FORM** |
| **COMPANY INFORMATION** |
| Name: VIA University College  |
| Central business registration: 3077 3047 | Phone: +0045 87550000 | Email: summerschool@via.dk |
| Address: Hedeager 2  |
| Postal code: 8200  | City and country: Aarhus N, Denmark |
| **CUSTOMER INFORMATION** |
| Name: |
| Address: |
| Phone: | Email: |
| City and country: | Postal code: |
| **THE FOLLOWING GOOD WHERE THE RIGHT OF THE WITHDRAWAL SHALL BE EXERCISED (access card)** |
| Access card to VIA Summer School’s social programme (30 Euro) |
| **THE DATE OF RECEIPT OF THE ABOVE-MENTIONED GOODS (date of puchasement)** |
| Date:  |
| **CUSTOMER’S SIGNATURE** |
| I hereby notify that I wish to exercise the right of withdrawal in connection with the above-mentioned good. At the same time, I acknowledge that all information I have provided on the withdrawal form is correct.  |

The customer’s signature: Date: