



Return Form

1) If you wish to return or exchange any portion of your HawkGrips merchandise, please complete this form and include it with your return shipment.

2) Send your items to:
HawkGrips
Returns and Exchanges
1495 Alan Wood Rd.
Suite 201
Conshohocken, PA 19403

Invoice number: _____

Invoice date: _____

Was this a Trial item? Yes No

Return

Item(s) Returned: _____

Reason for Return: _____

List the items being sent back here. When we receive and process your return, you will be refunded the amount paid for each item.

Exchange

Item(s) Requested: _____

Reason for Request: _____

If requesting any replacement items, please specify here.

Contact

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Signature: _____ Date: _____