

**TICKET REFUND FORM FOR
e-tickets bought at targikielce.pl/sklep**
Please complete the form in block letters
PART I (TO BE FILLED OUT BY THE CLIENT)

TICKET INFORMATION

The ticket owner's name and surname		Ticket number	
The event the ticket was purchased for		Date of the event	
		Ticket type	Normal / reduced price / discount *

TRANSACTION DETAILS

Payer's name and surname			
Payment form		Ticket purchase date	
Transaction value <i>(total price of tickets)</i>		Ticket price	

BANK TRANSFER DETAILS

The account number to transfer the ticket refund (owned by the ticket purchaser)			
The bank account owner's name and surname			
The bank account owner's address			
City		Postal Code	
Street		House / apartment number	

* delete as appropriate

The ticket refund will be made via bank transfer to the account indicated in the form within 7 days after receiving the Ticket Refund Form .

I acknowledge I have read and accepted the e-ticket refund procedure information.

.....
(Applicant's signature)

.....
(Date of posting)

PART II (TO BE FILLED OUT BY TK EMPLOYEE)

The Form has been verified in terms of data and transactions accuracy.

TRANSACTIONS ID

.....
(signature of the person authorised)

.....
(date of the Form receipt)