

100 DAY TRIAL

100 DAY MONEY BACK GUARANTEE

www.philips.com.au

On selected Philips Steam Systems and Steam Irons*

Offer valid on Steam System Models: GC6602, GC7031, GC7035, GC7710, HC8642, GC8651, GC9550, GC9642. Steam Iron Models: GC3803, GC3811/80, GC3820, HC4514, GC4517, GC4519, GC4521, GC4522, GC4527, GC4865, GC4912, GC4913.



*Conditions apply, see www.philips.com.au/promotions.
Open to Aust. residents 18+. Valid for purchases of participating products between 1.06.17 and 01.06.18. Claimants must obtain a Return Authorisation Number within 100 days of purchase. Claims must be received within 130 days of purchase. See reverse for details.
Retain purchase receipt & product packaging. Max. 1 claim per household.

PHILIPS

PHILIPS GARMENT CARE 100 DAY MONEY BACK GUARANTEE

How to claim your money back:

Use your Philips Steam system or steam iron for up to 100 days in the recommended manner. If within this period you are not entirely satisfied with the performance of your product:

1. Please call 02 9912 4490 (during business hrs) within 100 days of purchase to obtain a RETURN AUTHORISATION NUMBER;
2. Complete details on this form (also available on www.philips.com.au/promotions), including why you are returning the product.
3. Send this completed form along with your product and all components in the original packaging with your original purchase receipt (please retain a copy of the receipt) to:

Philips Garment Care MBG, PO Box 6422, Baulkham Hills BC NSW 2153

so that it is received within 130 days of the purchase date (with final claims closing by last mail on 8.08.17). Failure to submit a claim in accordance with the instructions provided will render the Money Back Guarantee claim as void.

Please note: Postage costs for the return of the Eligible Products are the full responsibility of the claimant and will not be refunded

PLEASE PRINT CLEARLY

First Name: _____ Last Name: _____

Address: _____

Suburb: _____ State: _____ Postcode: _____

Daytime Telephone: _____ Email: _____

Model Purchased: _____ Receipt No: _____

Purchase Price: _____ Date of Purchase: _____

Store Name: _____ Store Location: _____

Return Authorisation Number: _____

Why are you returning this product? _____

Which brand have you used prior to purchasing this product? _____

I would like to receive payment via electronic funds transfer (EFT)

Account Name: _____

BSB: _____ Account number: _____

Bank Institution: _____

I would like to be kept up-to-date on the latest Philips news, updates, promotions and surveys. I also consent for Philips to use my information for promotional, marketing, publicity, research and profiling purposes.

Privacy Statement

Your info is used to conduct this promotion and may be disclosed to service providers and authorities as required. We may also use your info for our own marketing purposes and as set out in the Terms & Conditions. If the info is not provided you cannot enter. Our Privacy Policy contains details on how info is used, how you may access/correct info held and our privacy complaints process. Your info may be disclosed overseas.

For more information on our products, visit www.philips.com.au