



**STÄDEL**  
MUSEUM

## WITHDRAWAL FORM

If you want to cancel the contract, please fill out this form and send it back.

\_\_\_\_\_

To:

Städel Museum / Städelches Kunstinstitut und Städtische Galerie

Dürerstrasse 2

D-60596 Frankfurt am Main

Telephone +49(0)69-605098-200

Fax +49(0)69-605098-111

E-Mail: [besucherdienst@staedelmuseum.de](mailto:besucherdienst@staedelmuseum.de)

I/we\* hereby revoke the contract concluded by me/us\* for the purchase of the following goods\*/the provision of the following service\*

\_\_\_\_\_

Ordered on\*/received on \_\_\_\_\_

Name of the consumer(s) \_\_\_\_\_

Address of the consumer(s) \_\_\_\_\_

\_\_\_\_\_

\* Delete as appropriate

Signature of the consumer(s) (only when notified on paper):

\_\_\_\_\_

Date \_\_\_\_\_