



Defect Return Form

Customer Information

Name _____
Address _____

Retailer Information

Company Name _____
Address _____

Phone _____

International Distributor

Company Name _____
Address _____

Date of Bébe Belay purchase: _____
(original receipt shall be attached for replacements direct to customer)

Bébe Belay Product Style (circle one):

The Boutique Line: Monkey/Choo Choo/Cowgirl/Cowboy/Rock Star Pink/Rock Star Blue/Butterfly/Dragonfly/Other Specify _____

The Everyday Line: Squares/Seasons/Side Stripe Pink/Side Stripe Blue/Dots Pink/Dots Blue/Argyle Pink/Argyle Blue/Flower/Neck Tie/Zebra/Alligator/Other Specify _____

Failure Location (circle one):

Ribbon Seam Adjuster Clip

Failure Description:

