# E n c l o s u r e ./V 2

(to the agency contract)

# REVOCATION FORM

(ATTENTION: the data of the agency company must be filled in at the latest when the contract is concluded!)

To the agency company: ………………………………………. Address: ……………………………………….

………………………………………. Fax number (if available): ……………………………………….

Email address: ……………………………………….

I hereby …………………………………………. (Name) revoke the agency agreement

……………………………. signed by me on (date) for the provision of the services therein described, selected and referred to in Point 4.

Name of the client: ………………………………………….

Name of the person who is to receive care

(insofar as this person is not identical with the client): ………………………………………….

Address of the client: ………………………………………….

………………………………………….

Place/date ……………

…………………………………………………….. (Signature of the client)