

# DOCUMENT 2: FEEDBACK FORM

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*Kyngdy\_Return\_Request\_Form.pdf)*

## KYNGDY

### Start Your Return

*Please complete this form to initiate your return process. Your honest feedback helps us formulate better skincare for everyone.*

## 1. Customer Information

- Full Name:

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- Email Address:

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- Phone Number:

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- Order Number:

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## 2. About You

- Gender:  Female  Male  Non-Binary   
Prefer not to say
- Age Range:  18–24  25–34  35–44   
45–54  55+

- **Profession:**
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- **Skin Type:**  Dry  Oily  Combination  Sensitive  Normal

### 3. Return Details

- **Product Being Returned:**
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- **Is the bottle opened?**  Yes  No
  - **Reason for Return (Please check one):**
  - **Allergic Reaction** (Redness, itching, hives)
  - **Texture/Scent** (Did not enjoy the feel or smell)
  - **Breakouts** (Experienced purging or acne)
  - **No Results** (Did not see expected improvement)
  - **Damaged/Defective** (Broken bottle or pump)
  - **Changed Mind** (Unopened items only)
  - **Detailed Feedback:** *(Please tell us more about your experience)*
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## 4. Authenticity Statement

*By checking the box below, I acknowledge the Kyngdy return policy.*

- I certify that this product is genuine. I understand that Kyngdy inspects and analyzes the chemical composition of all open returns. I confirm the content has not been diluted, tampered with, or substituted.

**Date:** \_\_\_\_\_ **Signature:**

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*Kyngdy reserves the right to update this policy at any time to improve the customer experience and brand protection.*