



**VISIONPROS CONTACT LENS RETURN/EXCHANGE FORM**

\*\*\*\*\*Please print this form and include it with your return shipment.\*\*\*\*\*

**Return Order to:**

VisionPros.com  
1750 Grant Avenue  
Blaine, WA, 98230

**Returned items must meet these requirements:**

- Items must be shipped back in a sturdy, cardboard box.
- Items must be UNOPENED( in original condition).
- Items must be UNMARKED.
- Items must be within 15 months of expiring.
- Items must be purchased within the past 365 days.
- 90 packs must be sealed.
- **You must email us the tracking number for your return shipment.**

**Shipping:** Please be advised that the customer is responsible for any shipping costs associated with sending the package back to VisionPros. **A 10% restocking fee applies to all returns sent back for a refund.** If you wish to apply a store credit, the restocking fee will be waived.

**Return Processing Time:** Once we have received your package, your return will be processed within 3-5 business days. You will be notified via email once your return is processed. Please be advised for refunds, it can take an additional 3-5 business days for the reversed charges to appear on your statement. **Original shipping charges and any insurance fees are non-refundable.**

**Please fill out the following:**

How would you like us to handle your request? Please tick the one that applies:

STORE CREDIT	REFUND	EXCHANGE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Order Number: \_\_\_\_\_

Order Date: \_\_\_\_\_

Name: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov/State: \_\_\_\_\_ Postal Code/Zip Code \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Please only fill out if you are doing an exchange to indicate which items you would like in replacement:

BRAND	POWER	CYL (if applicable)	AXIS (if applicable)	ADD (if applicable)	D/N (if applicable)	BASE CURVE	DIA	QTY	COLOR (if applicable)

*\*\*Replacement items that are more costly than the original items returned will need to be billed the difference in cost before reshipment. A customer service representative will contact you via phone to obtain payment information.*

*\*\* Lenses that are sent back in conditions that do not meet our return/exchange standards will be held at our facility for 90 days before being discarded. Please contact us as soon as possible if you wish to have your lenses shipped back to you. ( Re-shipping fees will apply).*

Please sign and date below indicating that you have read and understand our terms to process your return shipment. Failure to fully complete this form and enclose it with your package will delay the processing of your refund or exchange. We require your tracking number to track your return shipment back to our facility. Please email it to us at [info@visionpros.com](mailto:info@visionpros.com) along with your order number.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Additional Requests/Comments: