



FOR A LIMITED TIME ONLY

100% SATISFACTION GUARANTEED OR YOUR MONEY BACK ON CERAVE HAIRCARE

CeraVe® Money Back Guarantee Terms and Conditions

(not payable at retail store)

If you are not completely satisfied with your purchase of your CeraVe® hair care product for any reason, CeraVe® will refund the purchase price—less sales tax and shipping—in the form of a prepaid MasterCard® sent to you by mail. This Money Back Guarantee program is only valid for CeraVe® hair care products and in accordance with these Terms and Conditions.

The Money Back Guarantee program is limited to a single Refund Request for a maximum refund amount of \$21.98 and covering no more than two different CeraVe hair care products—provided the two products were purchased together during the Money Back Guarantee Term as defined below (the “Term”). Regardless, consumers may submit no more than one Refund Request during the Term.

If after reviewing these terms and conditions you have additional questions about this Money Back Guarantee program, please call 833-391-2613.

If you are not fully satisfied with your product(s), and would like to request a refund, please fill out the Refund Request Form below.

All requests are subject to the following terms and conditions:

1. **Money Back Guarantee Term:** Product(s) must be purchased during the period from and including February 24, 2025 through and including December 31, 2025 (the “Term”). The Term may be extended at the manufacturer’s sole discretion.
2. **Original Receipts:** All Refund Requests must include a properly completed Refund Request Form and the original in-store purchase receipt or the ship confirmation receipt for online purchases, in each case dated during the Term. Please circle the CeraVe® hair care product (s) purchase and price.
3. **UPC Codes:** All Refund Requests must include the UPC code from the product(s). If submitting for two products, they must have been purchased at the same time and bear different UPC codes.
4. **Refund Request Submission Deadlines:** All Refund Requests must be mailed to the address below and postmarked within 60 days of purchase.
5. **Refund Request Mailing Address:** Mail your completed Refund Request Form and purchase receipt to: CeraVe® MBG, PO Box 2052 Dept. P192949, Grand Rapids, MN 55745-2052.
6. Limit one Refund Request per person and per address. If multiple requests are submitted by the same person or from the same address, only the first request received will be considered.
7. Customer must use the prepaid card by no later than the expiration date printed on the card.
8. We will notify you via email if your submission is not valid (e.g. missing any of the required information or submitted beyond the relevant deadline). Consumers will have three weeks from notification to correct the submission and resend **if still within the Term**. Please allow 8 to 10 weeks for shipment of your prepaid card.
9. This offer is valid only to residents of the 50 United States and D.C. 18 years of age (or age of majority in that state if different) or older and only on CeraVe® hair care products, not any other CeraVe® products.
10. Refund Requests from clubs or organizations will not be honored.

11. All items submitted must be originals. No mechanically reproduced, fraudulent, or forged receipts will be accepted.
12. Return of any refund prepaid card as undeliverable will result in forfeiture of the refund.
13. CeraVe® is not responsible for late, lost, illegible, damaged, incomplete, misaddressed, misdirected, inaccurate or postage-due mail, receipts, or refund prepaid cards or for any errors relating to this offer. CeraVe® has no obligation to acknowledge refund requests or provide a refund to anyone who has not strictly complied with these terms, including any requests not containing the required original receipt and UPC, and contact information. Without limitation, trading, buying, selling, or manufacturing receipts is considered a violation of these terms and may result in mail fraud prosecution. Personal information you provide will be handled subject to the CeraVe® Privacy Policy, available at www.cerave.com/your-privacy-choices. If after 10 weeks you have not received your prepaid card, please contact us at www.cerave.com.

Please print clearly – proper delivery depends on a complete and correct address.

*Fields with an asterisk are required

First Name*: _____ Last Name*: _____

Address*: _____ Apt. #*: _____ City*: _____

State*: _____ Zip Code*: _____ Date of Birth (MM/YY)*: _____

Email*(submission status update sent via email) _____

UPC Code(s) from Product*: _____

Reason for Dissatisfaction: _____