

**email**

**Attn:**                   **Reservations**                   **From:**  
**Fax no:**               **02 6331 2203**                   **Date:**

**GIFT CERTIFICATE REQUEST**

Following is the information that we require to provide a gift certificate for use at **Cobblestone Lane**. We can provide a gift certificate for any amount that you nominate.

**Please fax or email the completed form back as per the details above.**

**Gift Certificate Details**

Amount of the gift certificate   \$ \_\_\_\_\_  
Message you would like on the certificate \_\_\_\_\_  
Person/Organisation the gift certificate is From \_\_\_\_\_

**Collection Details**

If picking the gift certificate from the restaurant, what date and approximate time would you like to do so -  
\_\_\_\_\_  
For mailing the gift certificate, what is the name and address you would like the gift certificate sent to -  
\_\_\_\_\_  
\_\_\_\_\_  
If you would like a receipt, please provide name and address to send to, if different from above..  
\_\_\_\_\_

**Payment Details**

**Method of payment for the gift certificate:**    Cash    Cheque    Credit card  
If the payment is to be made by credit card, please complete the following:  
Type of card:    AMEX    BANKCARD    VISA    MASTERCARD    DINERS  
Name of the cardholder \_\_\_\_\_  
Credit card number \_\_\_\_\_  
Expiry date: \_\_\_\_\_ Four digit security code: (AMEX only) \_\_\_\_\_  
Amount to be charged \$ \_\_\_\_\_ Signature of cardholder \_\_\_\_\_  
Contact name \_\_\_\_\_ Contact phone number \_\_\_\_\_

**If you require any further information, please do not hesitate to contact us.**