



GIFT CARD ORDER FORM

FAX TO - 905-682-5900

Business Name.....
 Name of person placing order
 Address
 City Postal Code
 Telephone # Date

# of cards	\$ Amount	Fee	Total
		\$1.50/crd	
		\$1.50/crd	
		\$1.50/crd	
		\$1.50/crd	
		\$1.50/crd	
		\$1.50/crd	
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		\$1.50/crd	
		\$1.50/crd	
		\$1.50/crd	
		\$1.50/crd	

PLEASE NOTE: THERE IS AN ADMINISTRATION CHARGE OF \$1.50 FOR EACH CARD ACTIVATED/ A SHIPPING FEE OF \$10 MAY ALSO APPLY

Visa Mastercard Card number
 Name on card Expiry date
 Verification # (from back of card)
 Pick up Delivery Date Required.....

Additional information

Signature
 Print name