



PLEASE PRINT THE FORM BELOW AND FAX TO:
231-929-8740.

Your gift certificate will be processed & mailed the following business day.

For office use: Order taken by _____ GC#
Date Mailed _____ Manager _____

Purchaser Name:

Purchaser Phone:

Send Gift Certificate to:

Purchaser (Receipt will be included.)

Recipient

Purchaser Address::

Recipient Address:

do not include recipient address unless you would like the gift certificate mailed directly to them.

Amount of Gift Certificate: \$

Method of Payment:

VISA MC Amex Discover

Card Number:

Sec. Code: _____ Exp. Date: _____

Cash/Check (Gift Certificate will be mailed when payment is received.)