



the**VINE**
AT BRIDGES

Gift Certificate Request Form

Name (Purchaser): _____

Phone: _____ Date: _____

Mail to: (Check one) Purchaser Recipient Pick Up

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Billing Information: Please check type of Credit Card:

Visa Master Card American Express Diners Club

Credit Card Number: _____ Expiration: _____

Dollar Amount: _____

To: _____

From: _____

Card Hold Signature: _____

Comments or special requests: _____

*All gift certificates will be mailed unless otherwise instructed. (Additional cost may incur)
Please fax 925.8207211 and we will call to confirm request prior to processing.*

480 Hartz Avenue, Danville, CA 94526 • Phone 925.820.7210 • Fax 925.820.7211