

Gift Certificate Order Form

Please complete this form if you wish to purchase a gift certificate. In order to process your request we require all fields to be completed.

Purchaser Information:

Name:	
Company Name:	
Telephone Number/Mobile:	
Amount of Gift Certificate:	\$
Method of Payment: Cash/ Credit Card <i>(\$1.00 will be added to cover postage if required)</i>	Type: Card No: Expiry Date: Name on Card:

Gift Certificate Details:

To: _____
From: _____
Message: _____

Please circle your preferred delivery method:

- I will collect the gift certificate on (date) _____
- Please post the gift certificate to the address below

Recipient Information:

Name:	
Address:	

I understand, and will explain to the recipient, the gift certificate is considered cash, and cannot be replaced if lost.

Authorised Signature: _____ Date: _____

Office Use Only:

Certificate issued by _____ Date _____ Certificate# _____

Method of collection (circle): Posted/Collected in person

ERA FAX NUMBER: (07) 3255 2833