

THE ATLANTIC

OCEAN TO PLATE

GIFT VOUCHER PURCHASE FORM

PURCHASER DETAILS

Name: _____ Email: _____
Phone: _____ Address: _____
Fax: _____

Voucher to be **picked up by:** _____ Voucher to be **sent via mail to:** (please circle) _____ **Postage Speed:** (please circle) _____
PURCHASER RECIPIENT REGULAR EXPRESS (additional \$10.00)

VOUCHER DETAILS

To: _____ Name & Address to Post: _____
From: _____
Message: _____
Amount: \$ _____

This Voucher is not redeemable for cash and is for single use only in The Atlantic Restaurant.

PAYMENT DETAILS

Visa: Cardholder Name: _____
MasterCard: Card Number: _____
Amex: Expiry Date: _____ CSV: _____
Cash: Signature: _____

Please note, all credit card payments incur a processing fee of 1.32% (Visa & MasterCard) or 1.75% (American Express)

AUTHORISATIONS

I, _____, authorise The Atlantic to debit the provided credit card for the amount shown above and acknowledge that The Atlantic Restaurant takes no responsibility for vouchers sent or misdirected via Australia Post.

Signature: _____ Date: _____

OFFICE USE ONLY

GV #: _____ Total Charged: _____
Date Posted: _____ Receipt Sent: _____