Z U N I Café
Fax Credit Card Gift Certificate Order Form

Please fax this completed form to Zuni Café at 415.552.9149

Date _____

Name: _____

Billing Address: _____ **Zuni Café will contact you at this telephone number once your order has been processed.**

City, State, Zip: _____

Telephone: _____ Email: _____

Circle One: VISA MasterCard American Express

Credit Card Number: _____ Exp. Date: _____ Security code from back of VISA/MC and front of AMEX _____

Gift Certificate:

To: _____

From: _____

Amount: _____

Mail Gift Certificate to:

Name: _____

Address: _____

_____

City, State, Zip: _____

Shipping Method: (Please choose **one**)

_____ Priority Flat Rate US Mail ($6.65)

_____ Federal Express Saver 3 Day

_____ FedEx 2 Day

_____ FedEx Standard Overnight

_____ FedEx Priority Overnight

Please note:

Zuni Café must receive your fax by 3pm (Tue-Fri) for same day shipping; we are closed on Mondays. Otherwise, we will ship your order on the following business day. ***USPS or Federal Express will charge your credit card directly for your chosen shipping method.*

Authorization:

I, _____ , authorize the above items to be charged to the credit card listed above.

Signature _____ Date _____

Zuni Café Use Only:

Received by: _____ **Processed by:** _____

Date: _____ **Date:** _____

Gift Certificate # : _____ **Pick Up/Mail/Ship Date:** _____

Confirmed Order w/ Customer: _____ **USPS / Federal Express Tracking #** _____