



### Gift Card Application

Please fill out the appropriate information and sign.

#### Purchaser's Information

Name(as appears on credit card):\_\_\_\_\_

Billing Address:\_\_\_\_\_

City:\_\_\_\_\_State:\_\_\_\_\_Zip:\_\_\_\_\_

Telephone Number:\_\_\_\_\_

Credit Card Type:\_\_\_\_\_Expiration Date:\_\_\_\_\_

Card Number:\_\_\_\_\_CCV\_\_\_\_\_

Billing Zip Code\_\_\_\_\_

If you would like us to mail the gift card to the recipient please fill out the following.

#### Recipients Information

Name:\_\_\_\_\_

Mailing Address:\_\_\_\_\_

City:\_\_\_\_\_State:\_\_\_\_\_Zip:\_\_\_\_\_

Telephone Number:\_\_\_\_\_

Personal Note:\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**I hereby authorize Bentley's Restaurant to charge my credit card in the amount of \$\_\_\_\_\_ for the purchase of a Bentley's gift card.**

**Print Name**\_\_\_\_\_

**Signature**\_\_\_\_\_

Please note a signature and price of gift card is required to process request.

Upon completion, please email to Jim Emad at jim@bentleysrestaurantnc.com