



Request for a Gift Voucher

Details you wish to have on the voucher.

Recipient's Name:
Amount:
From:
Comments:
.....
.....

Where would you like your gift voucher posted:

Name:
Address:
.....
.....
.....

Your contact details:

Name:
PhoneNo: Fax No:
Email:
Date:

Please choose a payment method

- Credit card type: Mastercard / Visa (please delete as applicable)
- Electronic Fund Transfer
- Payment in person

Cracked Pepper Restaurant respects the confidentiality of your payment details and upon receipt of your request we will contact you by phone or fax.

Conditions:

1. The gift voucher is valid for 12 months from the date of issue.
2. The reference number quoted MUST be included on the EFT to identify your payment.
3. No refund of unused portion of the voucher.
4. Once payment has been received we will process your personalised Gift Voucher within 2 working days and notify you.

Thank you for your business.
Ph: /Fax: 02 4998 7076
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