

# Sinbad Gift Certificate Form

Please complete and fax to 201-770-9310

Sinbad Cafe & Grill  
20 Meadowlands Pkwy  
Secaucus, NJ 07094

## Gift Certificate Value

\$25 x \_\_\_\_\_ \$50 x \_\_\_\_\_ \$75 x \_\_\_\_\_ \$100 x \_\_\_\_\_ Total \$ \_\_\_\_\_

## Payment Information (please circle one)

AMEX MC VISA DISCOVER CC# \_\_\_\_\_

Name of Credit Card Holder \_\_\_\_\_ Exp Date \_\_\_\_\_ Security Code \_\_\_\_\_

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

Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_ Email Address: \_\_\_\_\_

Signature of credit card holder \_\_\_\_\_

## Gift Certificate To Be Mailed To

Name \_\_\_\_\_ Address \_\_\_\_\_

## Gift Certificate Information

Gift Certificate to: \_\_\_\_\_ Gift Certificate from: \_\_\_\_\_

Message (one line only please)

\_\_\_\_\_

## Shipping Method

Please check one of the following:

☐ Please mail my Gift Certificate via US Mail

-or-

☐ I would like to pick up my Gift Certificate

Date sent \_\_\_\_\_ GC ID # \_\_\_\_\_