



GIFT CERTIFICATE REQUEST

please type or print clearly

TO Name: _____

FROM Name: _____

PHONE: _____

GIFT CERTIFICATE AMOUNT: _____

CREDIT CARD NUMBER: _____

EXPIRATION DATE: _____

PLEASE CIRCLE CREDIT CARD

VISA DISCOVER MASTER CARD AMERICAN EXPRESS

ADDRESS – to send gift certificate _____

ADDRESS – to send credit card receipt
(if different from above)

I AUTHORIZE LA PETITE MAISON TO CHARGE MY CREDIT CARD FOR THE ABOVE AMOUNT.

SIGNATURE _____

DATE _____

**Please fax to 719-632-0340
or call us at 719-632-4887**

