

Sushi Village Japanese Restaurant

4272 Mountain Square Whistler, BC VON 1B4 Tel: 604-932-3330 Fax: 604-932-2594 www.sushivillage.com

Credit Card Authorization Form

So you would like to purchase a Gift Card.... that's nice of you!

I authorize Sushi Village to charge my credit card for the purchase of a Gift Card in the amount of: (please circle)

325	\$50	\$75	\$100	\$ T	his Amount
My	Name:				
My Cre	edit Card N	0:			
]	Expiry Date	e:			
		This G	lift Card wil	l be goi	ng to:
Luck	y Person's	Name:			
		I would	like it to be:	(please	e circle)
					Registered Mail (add \$20)
		Gift Recipi	ent's Addre	ss: (if a	applicable)
Your Signature:					Date:

Please return this completed form by **fax or email.** Also include a **scan/copy/photo** of the above **credit card** (front only) and a **corresponding piece of ID.** Thank you for choosing Sushi Village!!

A receipt of this transaction will be emailed to you upon completion.

Amounts charged will be in Canadian Dollars, standard exchange rates will apply.