

# SELLAND FAMILY RESTAURANTS

## **GIFT CARD PURCHASE FORM**

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Please complete the form below and email to [giftcards@sellandfamily.com](mailto:giftcards@sellandfamily.com) or fax to (916) 400-4562.

For questions or inquiries please call (916) 281-0217.

### **Restaurant Information** *(Gift cards may be redeemed at all locations)*

- The Kitchen Restaurant       Selland's Market-Café       OBO' Italian Table & Bar  
 Ella Dining Room & Bar       Selland Family Restaurants *(includes all SFR restaurant logos)*

### **Billing Information**

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

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

City, State, Zip Code: \_\_\_\_\_

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

Email: \_\_\_\_\_

### **Payment Method**

- Visa       MasterCard       Discover       American Express

Card Number: \_\_\_\_\_ Expires: \_\_\_\_\_

CVC: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Gift Card Amount(s): \_\_\_\_\_

*Gift cards will be processed within two business days and mailed through the United States Postal Service.*

*Please note we cannot guarantee delivery date or exact delivery time frame of gift card(s).*

### **Delivery Information** *(if different from above)*

Recipient Full Name: \_\_\_\_\_

Delivery Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Message *(280 character limit)*: \_\_\_\_\_

*I hereby authorize Selland Family Restaurants to charge my credit card as shown above for said purchase amount.*

\_\_\_\_\_  
Cardholder Signature (Required)

\_\_\_\_\_  
Date