



Name of Recipient: _____

Address: _____

Telephone: _____

Name of Purchaser: _____

Address: _____

Telephone: _____

Date to Recieve By: _____

Amount of Purchase: _____

Address to Whom Gift
Certificates are to be Mailed: _____

Please Choose a Shipping Method

Regular Mail (*Signature required that Lake Blackshear Resort is not responsible for Gift Certificates lost or delayed in mail.*)

\$1.00

Credit Card Information

American Express Discover Mastercard Visa

Card Number: _____ Exp. Date: ____ / ____

Security Code: _____

A copy of the front & back of the credit card used is required.

Card Holder & Authorized Signature

Printed Name

Signature

Card Holder Phone Number: _____

Billing Address: _____

Address

City

State

Zip Code