



Gift Card Order Form

Credit Card Authorization

Fax back to 713-524-7719

Today's Date: _____

Name (Purchaser) _____ Gift Certificate # _____

Phone: _____ Phone (alternate) _____ Fax: _____

Name (to be written on certificate) _____

From: _____

Dollar Amount: \$ _____

This letter authorizes Hugo's to charge my company or personal credit card. Please fax a photocopy of your credit card along with this letter.

Type of card:

Credit card account #: _____ Expiration date: _____

Name of card holder: _____

Signature _____

Mail to (fill in one) (O) Purchaser (O) Recipient (O) Pick up

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Mail Receipt to: _____

Special instructions: _____

*All certificates are mailed unless otherwise instructed

*Allow 1 week for certificates to be mailed

*A 10% fee will apply to cancelled and reissued gift certificates