

Today's Date: _____



Doryman's Inn Gift Certificate

To order a Gift Certificate. Please print this form, complete and fax or email back.

(949)675-7300 phone ~ (949)673-2101 fax ~ info@dorymansinn.com

* * * * *

I hereby authorize the Doryman's Inn to charge my credit card for a Gift Certificate:

The purchase of _____ Gift Certificate(s) at \$ _____ each
(# of GC's) (\$ of each)

Total Charge shall equal \$ _____ (total dollar amount)

* * * * *

Details to be written on the Gift Certificate (please print clearly):

To: _____

From: _____

Message: _____

Mailing Information (please print clearly):

To: _____

Address: _____

Buyer Contact Information (please print clearly):

Name: _____

Phone: _____

Email: _____

I AUTHORIZE THE DORYMAN'S INN TO CHARGE MY CARD THE AMOUNT OF \$ _____

CARD TYPE: ___ VISA ___ MASTERCARD ___ AMEX ___ DISCOVER

CARD # _____ **EXP** _____ **CVC** _____

NAME ON CARD _____

BILLING ADDRESS _____ **STATE** ___ **ZIP** _____

SIGNATURE _____ **DATE** _____

2025