



GIFT CARD ORDER FORM

Date: \_\_\_\_\_

From: \_\_\_\_\_

To: \_\_\_\_\_

I Authorize Valentino Santa Monica To Charge My Credit Card Account.

Presented To: \_\_\_\_\_

Presented From: \_\_\_\_\_

Gift Certificate Value: \$ \_\_\_\_\_

Visa      Master Card      American Express

Account # \_\_\_\_\_ Exp. Date \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Fax \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you would like for us to send the gift card to the recipient,  
Please fill information below

Recipient's information:

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

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

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

We may also include a personal greeting: \_\_\_\_\_

Serving the community for  
44 years  
Same owner same location

For Special Events please inquire at  
[giuseppe@valentinosantamonica.com](mailto:giuseppe@valentinosantamonica.com)

\* Please fax or email a copy of the front and back of your credit card &  
driver's license with this form

**Fax: 310-315-2791** or [giuseppe@valentinosantamonica.com](mailto:giuseppe@valentinosantamonica.com)