

# Corporate Gift Basket Order Form

## Company Info

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

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

\_\_\_\_\_

\_\_\_\_\_

## Contact Info

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

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

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

\_\_\_\_\_

## Basket Selection

VIP Platinum:

Quantity: \_\_\_\_\_

\_\_\_\_\_

VIP Gold:

Quantity: \_\_\_\_\_

\_\_\_\_\_

VIP Silver:

Quantity: \_\_\_\_\_

\_\_\_\_\_

Total Price: \$ \_\_\_\_\_

Method of Payment:

Cash  Check  Credit

Delivery Address (if different than above)

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

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

\_\_\_\_\_

## Spa Detail Selection

Relaxing: \_\_\_\_\_

Invigorating: \_\_\_\_\_

\_\_\_\_\_

Relaxing: \_\_\_\_\_

Invigorating: \_\_\_\_\_

\_\_\_\_\_

Relaxing: \_\_\_\_\_

Invigorating: \_\_\_\_\_

\_\_\_\_\_

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

Card Type:

MC  Discover  Visa  Amex

Card # \_\_\_\_\_

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

Cardholder's Name: \_\_\_\_\_

\_\_\_\_\_

Please fax the completed form to:

(201) 222-0113

Signature

Date