

# Absinthe

PRIVATE DINING

## Special Request Form

*Please fill out & return by fax to: 415-255-2385*

**or mail to: 398 Hayes Street, San Francisco, CA 94102**

**or scan and email to: [talk@absinthe.com](mailto:talk@absinthe.com)**

Name of Contact/Purchaser: \_\_\_\_\_

Telephone # (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Fax #(\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_

*Please select one of the following:*

**Purchase entire dinner including** \_\_\_\_\_ % gratuity *or*  not including gratuity

**Purchase Gift Certificate:** Amount \$ \_\_\_\_\_

Gift certificate to read: To \_\_\_\_\_

From \_\_\_\_\_

Mail certificate To: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special Instructions:  
\_\_\_\_\_  
\_\_\_\_\_

Mail Receipt To:  
\_\_\_\_\_  
\_\_\_\_\_

Credit Card Type:  VISA  M/C  AMEX  DINERS  DISCOVER

Credit Card # \_\_\_\_\_ Exp. \_\_\_\_\_

Name on Card \_\_\_\_\_

Signature X \_\_\_\_\_ Date \_\_\_\_\_