



Gift Certificate Authorization Form

A gift to: \_\_\_\_\_ (Name of Recipient)

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

Amount: \$ \_\_\_\_\_ (USD)

I, \_\_\_\_\_ authorize the Library Hotel to charge my credit card for the amount listed above plus \$5 shipping and handling (Rush delivery available for an additional \$20).

**Billing Information**

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

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

Billing Address \_\_\_\_\_

\_\_\_\_\_

Contact Phone \_\_\_\_\_

Email \_\_\_\_\_

Cardholder Signature \_\_\_\_\_

**\*Please note the Gift Certificate expires three (3) years from date of purchase.**

**Gift Recipient**

Please complete this section only if you would prefer the gift certificate and brochure be mailed directly to the recipient. Otherwise, delivery will be made to the billing address above.

Recipient's Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Special Message \_\_\_\_\_

\_\_\_\_\_

Please complete this form and return it to the Library Hotel as follows:

Joel Trevino  
Library Hotel  
299 Madison Avenue  
New York, NY 10017  
Joel@LibraryHotel.com  
Ph 212-204-5408  
Fax 212-204-5401