## ISTRAL

## **Columbus Hospitality Group** Gift Card Order Form

Thank you for your interest in Mistral. We appreciate you thinking of the Columbus Hospitality Group. This Gift Card will be honored at all seven of our locations.

















Certificate to:		
Certificate from:		
Message of Gift Card:		
\$ Amount:		
Credit Card Number:		Exp:
Name of Cardholder:		
Phone Number:		
Billing Address:		
I authorize Mistral restaurant to charge my credi  Cardholder Signature:  Date of Request:		_
Mail Gif	t Card to:	
Name:		
Company:		
Address:		
City:		

MISTRAL

223 Columbus Avenue Boston, MA 02116 Phone (617) 867-9300 Fax (617) 351-2601 www.mistralbistro.com

