Sparks Water Bar 325 Harbour Cove Drive, Suite 101 Sparks, NV 89434

Phone: (775) 351-1500

For Gift Card and Retail Purchases Visit the Shop Page on sparkswaterbar.com or Return this Form to Sparks Water Bar Email at office@sparkswaterbar.com OR kathy@sparkswaterbar.com (If this is a purchase within 36 hours of receipt of this request, please call 775-351-1500 to speak with a manager)

Your signature below authorizes Sparks Water Bar to charge your credit card for a phone or internet order.

I,				
Mailing Address:	City: _	City:		Zip
Code: Phone: ()	E-Mail:	Authorize	e Sparks Water Ba	ar to
charge my: Visa () Master Card () I	Discover () American I	Express () Credit C	ard Number:	
Expiration Date:Security Code: _	For: Gift Card ()	Retail () Food/Be	verage () Deposi	it () \$
Gift Card Instructions:				
Amount: \$ Presented To	:	Given By:		
Retail Purchase: (Postage fees w	ill apply)			
Retail Item: Qty: Size: Color: Price: S	\$ Retail Item: Qty: Size	Color: Price: \$ Fo	od/Beverage	
<u>Purchase:</u>				
Food/Beverage Item:Qty: Price: S	\$ _Gratuity % :	Plus current sal	es tax and mailin	g charges,
where applicable, for a Total	Amount of: \$	Reservation	Date, Name	and Time
Customer Signature: Date: Mailing Instructions: () OR Custo	omer Pick Un: () Mail	to Name:		
Mailing Address:		•	Completed	By:

Your signature authorizes Sparks Water Bar to debit your credit card for the above amounts on said date. **NOTE – VARYING POSTAGE FEES WILL APPLY DEPENDING ON SIZE & WEIGHT OF RETAIL ITEMS. 6.16.22