

Bakery Advance Order Form

Name: _____ Gold Rewards Card # _____

Contact Phone Number: _____ Email: _____

Date of Order: _____ Date of Pickup: _____

Premium Chocolates \$5.99 x Qty: _____ = \$ _____

Specify Flavor: _____

Giant Cookie \$1.79 x Qty: _____ = \$ _____

Specify Flavor: _____

Eclair \$3.99 x Qty: _____ = \$ _____

Hard Candy \$3.99 x Qty: _____ = \$ _____

Specify Flavor: _____

Almond Horseshoe \$2.99 x Qty: _____ = \$ _____

Individual Cream Pie \$5.99 x Qty: _____ = \$ _____

Specify Flavor: _____

8" Chocolate Cake \$19.99 x Qty: _____ = \$ _____

8" Carrot Cake \$19.99 x Qty: _____ = \$ _____

Brownie \$2.79 x Qty: _____ = \$ _____

Muffin \$1.39 x Qty: _____ = \$ _____

Specify Flavor: _____

Individual Fruit Pie \$5.99 x Qty: _____ = \$ _____

Specify Flavor: _____

8" White Chocolate Cheesecake \$19.99 x Qty: _____ = \$ _____

Subtotal: \$ _____

Tax: \$ _____

Total Amount of Order: \$ _____

Method of Payment: Cash _____ Comp _____

Notes:

