

Royal Bakery



Description 種類	Unit Price 單價 MOP	Qty 數量	Total 總額
Whole Cake 定制大蛋糕 (1 Pound 1磅)			
Apple Pie 蘋果批	220.00	_____	_____
Mocha Cake 摩卡蛋糕	220.00	_____	_____
Almond Pear Chestnut Mousse Cake 杏仁蜜梨慕斯蛋糕	220.00	_____	_____
Portugese Cream Pudding Cake 木糠慕斯蛋糕	220.00	_____	_____
Mint Chocolate Cake 薄荷朱古力蛋糕	220.00	_____	_____
Chocolate Raspberry Truffle Cake 紅桑子軟心朱古力蛋糕	220.00	_____	_____
Fresh Fruit Cake 鮮果蛋糕	230.00	_____	_____
Chestnut Cake 栗蓉蛋糕	230.00	_____	_____
Blueberry Mousse Cake 藍莓慕斯蛋糕	230.00	_____	_____
Peach Mousse Cake 蜜桃慕斯蛋糕	230.00	_____	_____
Chocolate Mousse Cake 朱古力慕斯蛋糕	230.00	_____	_____
Marble Cheese Cake 雲石芝士蛋糕	230.00	_____	_____
Strawberry Soy Cheese Cake 草莓豆奶芝士蛋糕	230.00	_____	_____
Chocolate Marquise Cake 朱古力蛋糕	230.00	_____	_____
Moist Devil Chocolate Cake 魔鬼朱古力蛋糕	230.00	_____	_____
Black Forest Cake 黑森林蛋糕	230.00	_____	_____
White Forest Cake 白森林蛋糕	230.00	_____	_____
Black and White Forest Cake 黑白森林蛋糕	230.00	_____	_____
Green Tea Mille Crepe 抹茶千層蛋糕	250.00	_____	_____
Earl Grey Mille Crepe 伯爵茶千層蛋糕	250.00	_____	_____
Mango Mille Crepe 芒果千層蛋糕	250.00	_____	_____
Mango Mousse Cake 芒果慕斯蛋糕	260.00	_____	_____
Strawberry Cake 草莓蛋糕	260.00	_____	_____
New York Cheese Cake 紐約芝士蛋糕	260.00	_____	_____
Strawberry Chocolate Box 草莓朱古力盒	260.00	_____	_____
Tiramisu 意大利芝士餅	260.00	_____	_____
Blueberry Cheese Cake 藍莓芝士蛋糕	260.00	_____	_____
Strawberry Mille Feuille 草莓千層酥	260.00	_____	_____

Subject to a 10% service charge for room service
客房餐飲服務須另收加一服務費

To place your order, please call us at 2855 2222 ext.137
or fax this form to Royal Bakery at 8597 9178.
Upon receipt, we will contact you to reconfirm your order.
1 day advance order is required

如欲訂購, 請致電2855 2222 轉線 137 或填妥表格並傳真至 2856 3008。
收到表格後, 我們將與閣下聯絡以確認訂單。
需提前1日預定

Name 姓名 _____

Pick up Date 提取日期 _____

Pick up Time 提取時間 _____

Address 地址 _____

Tel Number 電話號碼 _____

Fax Number 傳真號碼 _____

Cake Inscription 蛋糕祝福語 _____

PAYMENT BY CREDIT CARD 以信用卡付款
Please enclose a copy of your credit card (front and back)
請傳真閣下的信用卡(正面及背面)作參考備份。

Please debit the amount of MOP _____

From my credit card:
請由本人之信用卡戶口支付以上之款項:

Visa Mastercard UnionPay AMEX JCB

Card Number 信用卡號碼 _____

Expiry Date 有效日期 _____

Cardholder's Name 持卡人姓名 _____

Cardholder's Signature 持卡人簽署 _____