



RETURN THE FAVOR

VETERANS DISCOUNT PROGRAM



Merchant Application Form

Please use this form to enroll your business in our "RETURN THE FAVOR" Discount Program. Be sure to include the official name of your business, its address, hours, and discount specifications. This form must be signed by the business owner. You will be provided with a proof of your entry before the pamphlet is printed.

Please be aware that merchant's reserve the right to withdraw from the program at any time.

Business Name: _____

Address: _____

Telephone #: _____ Email: _____

Hours: _____

% Discount Specifications: (check one)

___ 10% ___ 15% ___ 20% ___ 25% ___ other _____

Limitations or conditions:

Business Owner Name (print) _____

Signature _____

Date _____

Return this form by mail or FAX to:

Cayuga County Clerks Office

160 Genesee Street, 1st Floor

Auburn, NY 13021

FAX: (315) 253-1653

Questions? Call the Cayuga County Clerk's Office at (315)253-1271

Email: sdwyer@cayugacounty.us

