



Gift Certificate Order form

Purchaser details

Name _____

Address _____

City, State _____

Zip Code _____

Email _____

Phone number _____

To whom should we send the certificate? Please check one

Purchaser Recipient

If you selected recipient please fill in the following details

Name _____

Address _____

City, State _____

Zip Code _____

Dollar amount for certificate (all certificates come in \$5 dominations)

\$

Who is the certificate From? _____

Leave Blank

Who is the certificate to? _____

Leave Blank

What message (if any) should be included _____

Please mail order form along with a check to

Clifton Springs Area Chamber of Commerce
PO Box 86
Clifton Springs, NY 14432

If you have any questions please call **(315) 462-8200** or email us on
info@cliftonspringschamber.com

Clifton Springs Chamber of Commerce is not responsible for any gift certificates lost in the mail.

PARTICIPATING MERCHANTS

- Artistic Hair
- Ashton Place
- Clifton Springs Big M
- Clifton Springs Chiropractic
- Clifton Springs Hardware
- Clifton Springs Hospital & Clinic
- Cafeteria/Lobby Shop/Coffee Cart
- Clifton Springs YMCA
- Curves for Women
- DeMarco & Buckley Barber & Beauty Shoppes
- Everson's Dairy
- Finger lakes Eye Care
- Nima's Pizzeria
- Peirce's Gift Shop
- The Rose Petal Gift Shop
- The Springs Center
- Talk of the Town II
- Sandy's Flora Gallery
- Explore! the Book Store