



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
- Explore! the Book Store
- Everson's Dairy
- Finger Lakes Eye Care
- Nima's Pizzeria
- Peirce's Gift Shop
- Sandy's Floral Gallery
- The Clifton Deli
- The Springs Center
- Talk of the Town II