



## 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, the business 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 list 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 form by mail or Fax to:  
Kathleen Sinnott Gardner  
Otsego County Clerk  
197 Main Street  
Cooperstown, NY 13326  
Fax: (607)547-7544

Questions? Call the Otsego County Clerk's Office (607)547-4276

