

Congratulatory Certificate Application

Occasion Information

Type of Occasion: _____

Date of the Occasion: _____

Number of years: _____

Date and time of Reception: _____

Location of the celebration event: _____

Celebrant Information

Salutation: _____

Last Name: _____

First Name(s): _____

Initials: _____

Address: _____

Would you like the Mayor or a representative of Council available to make the presentation during the event? Yes No

If no, please provide the mailing address that this certificate may be mailed to.

Note: *To insure timely delivery, please submit certificate request at least 6 weeks in advance of celebrations.*