

CONGRATULATORY CERTIFICATES

The Town of Collingwood is committed to recognizing significant dates, occasions and contributions of individuals. Requests must be made at least three weeks in advance of the required date to allow for preparation of the Congratulatory Certificate.

REQUESTOR INFORMATION:		Date:	
Name:			
Phone Number:		Email Address:	
OCCASION TYPE	Birthday Anniversary (Wedding) Other	Anniversary (Business / Organization) Retirement	
Date of Occasion:			
RECIPIENT INFORI	WATION: (Name to appear on Certificate)		
First:	Last:		
Company:			
Deadline Date (if o	lifferent from occasion date):		
COMPLETED CERT Please provide ma	_	ate will be picked-up at Town Hall or Other.	
Pick-Up	MailOther Mailin	g Address:	
Please provide add	ditional information regarding red	quest:	

Please return completed form including all additional information to officeofthemayor@collingwood.ca or by fax to (705) 445-2448.