



CLEARVIEW

Clearview Township Certificate Request

Celebrant's Information

Name:

Address:

Town:

Requested By

Name:

Phone Number:

Occasion Information

What is the Occasion? (Please choose one option)

Anniversary

Birthday

Other (Please provide details):

What is the Significance of the Occasion? (Number of years):

Date of Celebration:

Contact Information

How would you like to receive the certificate? (Please choose one option)

Mayor to present (Please provide details)

Pick-up at the Clearview Administration Centre

Please Mail the certificate/letter of congratulations

Details for Mayor:

Email this request to: stuck@clearview.ca

Or

Drop off, or mail this request to:

Clearview Township

217 Gideon Street

Stayner L0M 1S0

Attn: Sarah Tuck

Or

Fax this request to: 705428-0288 Attn: Sarah Tuck