



Serving our veterans at home

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Saratoga County Veterans F.A.V.O.R. Discount Program Merchant Application

Please use this form to enroll your business in the Saratoga County Veterans Discount Program. This form must be signed by the business owner or an authorized representative and returned to the Saratoga County Clerk. Merchants reserve the right to withdraw from the program at any time. Should any of the following information change, we ask that the business fill out our **Change Form** so we may adjust accordingly.

Business Name: _____ **Type of Business:** _____

Physical Address: _____

Mailing Address: _____

Email Address: _____

Website: _____

Phone #: _____

Service(s) Offered: _____

Discount (check one):

% off _____ \$ off _____ Other: _____

Restrictions to be listed: _____

Proprietor and/or authorized signature: _____

Please print name: _____

Date: _____ **# of Window Decals Needed:** _____

How did you hear about this program? _____

Return this form to:

Craig A. Hayner, Saratoga County Clerk
40 McMaster Street, Ballston Spa, NY 12020
Phone: (518)885-2213 / Fax: (518)884-4726
E-mail: FAVOR@saratogacountyny.gov
Website: www.saratogacountyny.gov