

Please note: NO REFUNDS-NO REPLACEMENTS IF LOST OR STOLEN

Name _____ Tel# _____
(please print)

Address _____

City /State/Zip _____

I wish to purchase _____ badges at \$ _____ each

Total Enclosed \$ _____ check# _____ cash _____ recpt# _____

Badge #'s Issued _____



Enclose check or Money Order made payable to:
Borough of Seaside Heights
And Mail to:
P.O. Box 38
Seaside Heights, NJ 08751-0038
Remember by May 14th-\$35.00 ea. After that-\$45.00 ea. If you
are AGE 65 or older, please inquire about our SENIOR BADGE

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