



519.500.5595 • [tricitytreeservice@gmail.com](mailto:tricitytreeservice@gmail.com)

## Referral Form

To participate in the Referral Program, please fill out your information below and simply give a copy to anyone you think would benefit from Tri-City Tree's services. When they sign up to become a Tri-City Tree Services' customer, and this form is returned to us, they will receive **10% off** and you will be notified regarding your discount on any future services rendered.

### Customer (Fill in your information)

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First Name

Last Name

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Contact Number

E-mail

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Mailing Address

---

City/Town

Postal Code

### Referral

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First Name

Last Name

---

Contact Number

E-mail

---

City/Town

Please note: You must be an existing Tri-City Tree Service customer to make referral.  
This referral form is intended for the use of new customers only, who have not previously been a customer.  
Limit of one referral form per client. Cannot be combined with any other offers.

Thank you, we truly value your business! Visit [www.tricitytreeservice.com](http://www.tricitytreeservice.com) for more information.