PRINCE OF PEACE LUTHERAN CHURCH MEMORIAL GARDEN REGISTRY

for the Interment of Ashes (Please Print Legibly)

APPLICANT NAME:	
STREET ADDRESS:	
CITY, STATE, ZIP CODE:	
HOME PHONE:	
CELL PHONE:	
EMAIL ADDRESS:	
l	
NAME OF PERSON TO BE INTERRED:	
DATE OF BIRTH:	
DATE OF DEATH:	
LAST KNOWN STREET ADDRESS:	
LAST KNOWN CITY, STATE, ZIP CODE:	
IS THIS A PLOT RESERVATION FOR FUTURE INTERMENT? (Circle One)	Ves No
I (we) understand that the interment of my ashes or the or the ashes of my (our) loved one in the Memorial Garden will be scattered into the ground without a container in a selected area. I (we) further understand that a bronze plaque permanently affixed to the Remembrance Tree will record the names and dates of those buried in the garden. I (we) have read and agree to all terms and conditions of the Memorial Garden Policy.	
Signature	Date
Print Name	
Submit this form, along with a check in the amount of \$100 to payable to "Prince of Peace Lutheran Church - Memorial Garden" (Mailing Address: 61 Route 70 East; Marlton, NJ 08053 or drop it off at the Church Office in an envelope labeled "Memorial Garden")	
FOR OFFICE USE ONLY	
PLOT ASSIGNMENT:	
DEPTH OF INTERMENT: (FOR MULTIPLE INTERMENTS)	
DATE OF BURIAL:	
APPROVED BY:	