



Seven Hills
crematorium

APPLICATION FOR AN ENTRY IN THE BOOK OF REMEMBRANCE

For office use only

Sent	
Inv No.	

Receipt No	
B.O.R Ref	
Our Ref	

Name of Applicant			
Address	_____		

			Postcode <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Telephone No.		Date	

ADDITIONAL MEMORIAL CARDS

Please supply.....memorial card(s) without emblems

Please supply.....memorial card(s) with emblems

I enclose a cheque/postal order for £..... made payable to **East Suffolk Crematorium Ltd**

PAYMENT CAN BE MADE BY CASH, CHEQUE, CREDIT OR DEBIT CARD

Please return to: The Manager, Seven Hills Crematorium, Felixstowe Road, Nacton, Ipswich IP10 0FG

Please state the date you wish this entry to be displayed in the book (which may be any day of your choosing)

Day:

Month:

Line 1	Surname:	Forename (s):
Line 2		
Line 3		
Line 4		
Line 5		
Line 6		
Line 7		
Line 8		

Please describe any emblem, badge or flower you would like to include with the entry:-

Please write legibly in **BLOCK LETTERS** using **BLACK INK** and check all details carefully as mistakes cannot be rectified later. No more than **32 letters/figures** are possible per line, this does not include spaces.

By signing this memorial application you hereby agree to our notice overleaf.

NOTICE

We respectfully request that all flowers are removed from any packaging and laid loosely on the ground or placed in vases provided by the crematorium.

No personal items or unofficial memorials are permitted this includes glass vases, candles/ lanterns, wind chimes, gravel, artificial flowers, fencing and ornaments anywhere within the gardens and woodlands. Any such items will be removed.

Seven Hills strives to keep the grounds as natural as possible and therefore ask for your co-operation.