

BOOK OF REMEMBRANCE REQUEST FORM

Please complete in BLOCK CAPITALS

Date and Month for the entry to appear in the Book of Remembrance. This is normally the date of death, but you may wish to choose a birthday or wedding anniversary.

Date		Month	
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Entry Details

Name of Deceased	
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Inscription

Description of artwork, e.g., type of flower or animal, with colour required.	
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Applicant's Details

Name
Address
Telephone Number
Email Address