## CHURCH OF THE GOOD SHEPHERD APPLICATION FOR MEMORIAL GARDEN PLOT

Name:	
Address:	
Phone:	
Family Contact:	Phone:
I/we hereby request the purchase of a plot for the into Shepherd Memorial Garden, in which we can place up Dollars (\$600.00) in confirmation thereof.	
I/we have read and do agree to the Policy and Regula Graveyard, Columbarium, and Memorial Garden.	tions governing the Church of the Good Shephero Initials:
Applicant Full Name:(please print)	Date of Birth:
Applicant Signature:	Date:
Applicant Full Name:(please print)	Date of Birth:
Applicant Signature:	Date:
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along with the sum of Six Hundred Dollars (\$600.00) in	confirmation thereof.
Permission is hereby granted, subject to the Policy and Graveyard, Columbarium, and Memorial Garden, for th The Church agrees to inter the ash remaplaque a bronze memorial nameplate with the name, permanent record of the location of interment in the Regulations.	e interment in the Garden of ash remains in Plot # ains when presented, to furnish and mount on its year of birth and year of death, and to maintain a
Accepted by: or Paid by	Date: