

Remembrance Garden Memorial Application Form

Please refer to our website www.brighton-hove.gov.uk/bereavement for a full description of all our Remembrance Garden Memorials. You can also find our current list of charges for all types of memorials on the website. When you have completed this form, you can send it with a cheque or postal order to Woodvale at the address below, or you can call in person at Woodvale Lodge, where we will be happy to discuss any Memorial queries with you.

Name of deceased <hr/>	Date of death <hr/>
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Please arrange for the following memorial to be provided in the Remembrance Garden at Woodvale.
Please tick appropriate box(es)

- | | |
|--|---|
| <input type="checkbox"/> Plaque on log
<input type="checkbox"/> Rose bush with plaque
<input type="checkbox"/> Tree with plaque
<input type="checkbox"/> Wooden casket with nameplate | <input type="checkbox"/> Memorial seat with plaque
<input type="checkbox"/> Plaque on a shared Memorial seat
<input type="checkbox"/> Children's memorial plaque
<input type="checkbox"/> Additional or replacement plaque |
|--|---|

Name of Applicant <hr/>	Mr / Mrs / Ms / Other <hr/>
Address <hr/>	
Post code <hr/>	
Email <hr/>	
Daytime telephone number <hr/>	<i>(To be used in event of query only)</i>
Signature <hr/>	Date <hr/>

Inscription – <i>in block capitals please</i>	(maximum of 5 lines with 35 characters per line)
1 <hr/>	
2 <hr/>	
3 <hr/>	
4 <hr/>	
5 <hr/>	

Woodvale reserves the right to amend or refuse any inscription if necessary.

A list of current charges is available on www.brighton-hove.gov.uk/bereavement

I enclose a Cheque / Postal Order, made payable to *Brighton & Hove City Council* for:

£	
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Send this application form, together with your payment to: Memorials Officer, Woodvale Lodge, Lewes Road, Brighton BN2 2QB. Payment can be made by cash, debit or credit card by presenting this form, in person, at the Woodvale Lodge.

Office use only Cremation number:	Memorial ordered:	Memorial placed:
Receipt number:	Updated register:	Applicant notified:
Casket required:	Cremation register:	To witness:
Location of ashes:	Memorial location:	Date of burial / strewing: