

APPLICATION FOR PURCHASE

A notarized deed will be issued for each membership purchased, **AT THE COST OF \$800.00**, entitling the owner to burial space for the remains of *one human body* in BELLA VISTA MEMORIAL GARDEN CEMETERY. *This does NOT include the cost of a Ground Stone or Niche Marker OR Interment Fees.*

PLEASE INDICATE INTERMENT PREFERENCE:

SECTION	SPACE #	PREFERENCE
		<input type="checkbox"/> In-Ground Body Interment (Interment by mortuary)
		<input type="checkbox"/> In-Ground Cremains Interment (+ Interment Fee)
		<input type="checkbox"/> Columbarium Niche Interment (+Interment Fee)
DEED #		<input type="checkbox"/> Conjoined Deed(s) #:

LAST NAME FIRST NAME MIDDLE NAME MAIDEN NAME (I/A)

NAME TO APPEAR ON MARKER

MALE FEMALE

MONTH/DAY/YEAR OF **BIRTH**

MONTH/DAY/YEAR OF **DEATH**

DATE OF INTERMENT

LOCAL RELIGIOUS AFFILIATION: _____

MORTUARY: _____

VETERAN? No Yes; BRANCH _____; MARKER? No Yes

SIGNED _____ **DATE:** _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

NAME & ADDRESS OF NEXT OF KIN: _____

RELATIONSHIP: _____

PAYMENT DETAILS: Check # _____ Acct: _____