

Application for Westminster Presbyterian Church Memorial Garden

I hereby request that the cremated remains of (please print name)

be interred in the Memorial Garden of Westminster	Presbyterian Church, Wilmington, Delaware. The
suggested minimum check donation (payable to k	Westminster Presbyterian Church) is \$200. Your
donation should be sent at the time of the application	on. The interment fee is not tax-deductible and is
currently \$100 (subject to change) and must be paid	prior to the interment service by separate check.
Information about the Applicant This information is used for both the memorial plaque	and for the interment service bulletin.
Date of birth: / / /	
Date of death (if applicant is deceased): /	_/
I have read and agree to the Regulations governing Garden (a copy was given to me at the time of a Regulations may change in the future and that the effect at the time the cremains are placed in the Gar	pplication). I agree and understand that these e Regulations (including the Interment Fee) in
Signature:	Name:
Date of Application: / /	

Please mail checks and application to:

Memorial Garden Administrator Westminster Presbyterian Church 1502 W. 13th St. Wilmington, DE 19806

Acceptance by Westminster Presbyterian Church

Westminster Presbyterian Church of Wilmington, Delaware acknowledges receipt of and accepts the					
Application of (name)		and	and the sum of \$		
(check #) dated	; plus the sum of \$	(check #)	
dated if the application		ication is being submitted at the tim	e of the interment.		
		Westn	ninster Presbyterian Ch	urch	
		Mer	morial Garden Administ	: rator	

(Office Use Only)		
Interment date:		
Location:		
Check #:		
Received by:		