Heref ordshire.gov.uk

APPLICATION FOR A BOOK OF REMEMBRANCE ENTRY

This is an interactive PDF form which you can electronically type into the fields or print to fill out manually.

To be completed by the Applicant and returned to Bereavement Services, Crematorium Office, Westfaling Street, Hereford HR4 0JE Tel: 01432 383200.

Please specify date of entry for display in the Book of Remembrance - (day and month only)

IF YOU WISH THE YEAR TO BE SHOWN, IT MUST FORM PART OF YOUR INSCRIPTION

Inscription guidance:

*On Line 1 only, please print surname first, followed by other names:

**WITH MOTIF - Permitted number of letters, including spaces and figures, no more than 22 per line.

WITHOUT MOTIF - Permitted number of letters, including spaces and figures, no more than 27 per line.

On Line 2 onwards, please print your inscription:

**WITH MOTIF - Permitted number of letters, including spaces and figures, no more than 34 per line.

WITHOUT MOTIF - Permitted number of letters, including spaces and figures, no more than 40 per line.

Names on line 1* only. Names and Surname	1	
2nd line inscription = 2 line entry only	2	
3rd line onwards are additional entry lines	3	
	4	
	5	
	6	
	7	
	8	

HEREFORDSHIRE COUNCIL reserve the right to vary any inscriptions as may be found necessary or to refuse an application which is considered unsuitable.

Motif	if required	(tick)	(000	price	lict)
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(If a motif is required, please reduce your inscription length – see above instruction**)

Please give details of the motif required including colouring

I enclose a payment of £					(Cheques payable to Herefordshire Council) (Cash and Card payments are also accepted)				
I confirm the inscription is correct									
Date Signature									
Applicant name and address (please print)									
Please print:	Mr	Mrs	Miss	Ms					
Address									
Postcode									
Tel. No:					E-Mail Address:				
Please notif	y Ber	eavem	ent Ser	vices of a	ny changes to t	these details			
On completing this form, please return it to:									
HEREFORDSHIRE COUNCIL Bereavement Services Crematorium Office Westfaling Street									
HEREFORD HR4 0JE Email: bereavement@herefordshire.gov.uk Tel: 01432 383200									
Herefordshire Council is the Data Controller under data protection law and will use the information you provide on this form in order to process your application. The legal basis for processing this data is our legal obligations for providing bereavement services. We will keep your data in accordance with our Record Retention Schedule. Where necessary we may share this personal data with partner organisations for the protection of public funds administered which may include the prevention or detection of fraud and auditing purposes. Individuals have a number of rights under data protection law, including the right to request their information. You also have a right to make a complaint about our handling of your personal data to the Information Commissioner's Office https://ico.org.uk/									
For Office Use		С	remation I	No:		Temporary Entry:			
EBS 018/16		In	voice No:	Red	ceipt No:	Date Temporary Entry Raised:			
23/09/2019		D	ate Order	ed:		Late Entry:			
Credit/Debit payn	nent:	0	rder No:			Date Late Entry Ordered:			
Cash payment:		С	heque No	:		Order No:			
A/C to Funeral Di	rector:					Scanned:			