

APPLICATION FOR A MEMORIAL CARD

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.

Memorial Card - please select design (tick) and number of cards required

Coloured Roses on coloured card		Number required	
Gold Cross on white card		Number required	
Gold Rose on white card		Number required	
To be collected	To be posted (P & P charges will apply)		

Please specify date of entry in the Memorial Card

Inscription guidance:

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

The name counts and is charged for as one line. Permitted number of letters, including spaces, no more than 27.

On Line 2 onwards, please print your inscription:

Permitted number of letters, including spaces and figures, no more than 34.

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) (see price list)

Please give details of the motif required including colouring

For inclusion of a personal photograph – please contact Bereavement Services.

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 notify Bereavement Services of any changes to 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

Cremation No:

Triptych received:

EBS 018/16

Invoice No:

Receipt No:

Date posted to Applicant:

25/09/2019

Date Ordered:

Date collected by Applicant:

Credit/Debit payment:

Order No:

Scanned:

Cash payment:

Cheque No:

A/C to Funeral Director: