

These forms will be sent direct to the artist for copying into the Books of Remembrance, therefore please carefully check your text as mistakes cannot be rectified later. The Council reserves the right to vary any inscription where necessary or refuse an entry which is considered unsuitable.

Entries to the Books of Remembrance will be prepared so that they may be viewed on the first anniversary required provided that an application is received as follows;

January, February, March	must be received by 1 October
April, May, June	must be received by 1 January
July, August, September	must be received by 1 April
October, November, December	must be received by 1 July

Name of deceased: _____ Date of death: _____

Full Name (print): Mr/Mrs/Miss/Ms: _____

Address: _____

Home phone: _____ Mobile: _____

E-Mail: _____

Signature: _____ Date: _____

Please send completed forms to Benhall Mill Road Royal Tunbridge Wells Kent TN2 5JJ

For Office Use Only.

Cremation Number:	Agreement Number:		
Receipt Number:	Entry under:	Day	Month Volume

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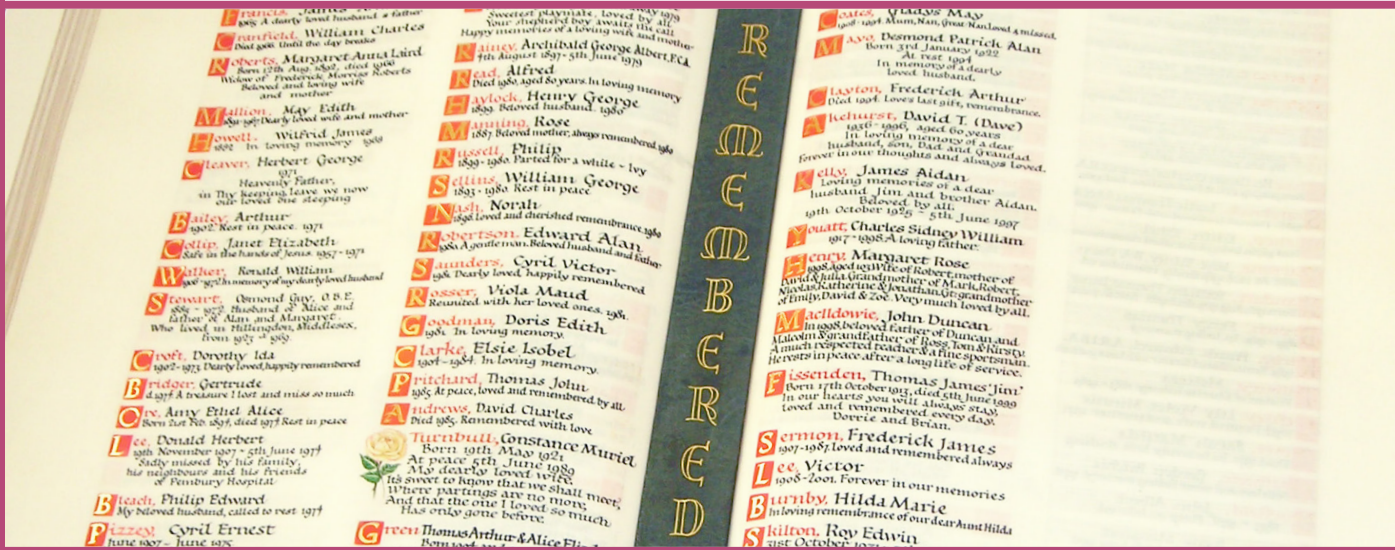
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KENT & SUSSEX
CREMATORIUM



ROYAL TUNBRIDGE WELLS



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