Application for an entry in the Book of Remembrance

1. Date entry to appear - alternative date,				For office use		
please specify				Cremation number:		
2. Please tick book of choice: Sandwell Valley				Receipt no./auth code:		
Rowley Regis				Checked		
3. Note - The name counts as and is charged for as one line. No more than 32 letters/figures can be accommodated upon each line. Entries must consist of a minimum of 2 lines.						
Two line entry	1				· · · · · · · · · · · · · · · · · · ·	
					 	
Five line entry	3					
	6				<u> </u>	
67					· · · · · · · · · · · · · · · · · · ·	
8						
4. Motif - Details of motif and/or attach an example						
5. Please supply Miniature book in grey						
White memorial card						
6. Please record in the Book of Remembrance (2) the entry set out above (3) under the date						
7. I enclose a cheque / Postal Order for £						
made payable to Sandwell Metropolitan Borough Council						
Please see enclosed Fees and Charges leaflet						
8. If possible please provide a telephone number in case we need to contact you						
9. Please sign and date: Sign: Date:						
(we reserve the rig	ght to vary any ins	criptions as may be found	necessary		nich is	
Applicant name and address:			Entry da	ite Sandwell Valley	Return form by	
			January	- March	November	
			April - Ju		February	
			July - Se		May	
			October - December		September	
				te Rowley Regis	Return form by	
F "			<u> </u>	eptember	February	
Email:			October	October - March August		

On completing this form please return it to :

