

**APPLICATION FOR INSCRIPTION IN THE BOOK OF MEMORY, MEMORIAL CARD OR
MEMORIAL BOOKLET**

PLEASE USE BLOCK CAPITALS

ENTRIES MUST CONSIST OF **2, 5 OR 8 LINES ONLY** WITH A MAXIMUM OF **32 LETTERS** ON EACH LINE.

FLORAL MOTIFS, SERVICE BADGES, COAT OF ARMS ETC, CAN BE INCLUDED AGAINST INSCRIPTIONS OF **5 OR 8 LINES ONLY**

DATE OF DEATH (OR ALTERNATIVE DATE YOU WISH THE ENTRY TO BE DISPLAYED ON)			
LINE 1	(SURNAME)	(FORENAMES)	
LINE 2			(max 32 letters on each line)
LINE 3			
LINE 4			
*LINE 5			
LINE 6			
LINE 7			
*LINE 8			
*TYPE OF FLORAL MOTIF/BADGE ETC (IF REQUIRED)			
NO OF MEMORIAL CARDS IF REQUIRED		NO OF MEMORIAL BOOKS IF REQUIRED	

(Somerset West and Taunton Council reserve the right to alter any inscription as may be necessary or to refuse any entry considered unsuitable)

NAME _____
 ADDRESS _____

 _____ POST CODE _____
 TELEPHONE _____
 SIGNED _____

Please send completed applications via email to crematorium@somersetwestandtaunton.gov.uk or by post to:-

BEREAVEMENT SERVICES
 TAUNTON CREMATORIUM
 WELLINGTON NEW ROAD
 TAUNTON TA1 5NE

Payment can be made via card payment over the phone on 01823 356381 or made in the Enquirers Office at Taunton Crematorium (see address above)