

General details

Funeral in the name of:

Date of service:

Time of service:

Type of service: full service

committal

Funeral director:

Funeral director address:

Name of applicant:

Telephone number: Home

Mobile

Relationship to the deceased:

Service details

Person conducting the service:

Faith or belief (if applicable):

Service sheets:

Number of rows to be reserved:

Instructions for committal (ie. curtains):

Size of coffin (there may be a limit):

Any special instructions or requirements:

All metal residues will be recycled by a non-profit making company, and any proceeds will be donated to charity. If you do not wish for this to happen, and you wish to reclaim any metal residues, please tick this box. For more information please see www.apcandc.co.uk

I, the applicant for the cremation of the above named deceased can confirm that my instructions for the ashes are in the accompanying Application Form (Cremation Form 1).

We understand that this is both a very difficult time and a difficult decision. To that end we will contact you following the funeral to confirm your instructions and to offer any assistance you may need.

I can confirm that I have read and understand the contents of this form.

Applicant signature:

Date:
