

DOVECOT MEMORIAL PARK
33A Hope Road
Kingston 10
Email: dovecot@gmail.com

Re: VAULT No.

This confirms that I/we are authorized to make arrangements for interment of the deceased shown below. The following arrangements have been made:

- Funeral Director:
- Place of Service:
- Address of Church:
- Time of Service:
- Date of Interment:
- Certificate No.:

Shown below are the details to be put on the head plaque:

- Name of Deceased:
- Epitaph:
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- Date of Birth:
- Date of Death:

I/we understand that the cost of any change of detail on plaque after today's date will be paid by me/us.

I/WE ALSO AGREE TO ABIDE BY THE RULES AND REGULATIONS OF THE PARK.

Signature of person/s giving above instructions:

- Address:
- Tel. No.:
- E-mail: