



ST. JOSEPH Garden

MEMORIAL GARDEN & COLUMBARIUM
St. Joseph, Pray for Us!

Niche Reservation & Interest Form

Please return one form per household.

Name(s) _____

Address _____

City/State/ZIP _____

Phone _____

Email _____

NICHE QUANTITY

Enter the quantity requested for each niche size.

Single niche - one urn

Quantity

Double niche - two urns

Quantity

\$500 REFUNDABLE RESERVATION DEPOSIT

☐

I wish to reserve niches and am providing \$500 per niche.

The deposit is fully refundable upon request or may be credited toward the purchase price of the niche. A deposit indicates reservation interest and does not establish the final niche location or purchase price until the parish issues a written purchase agreement.

Number of niches: _____

Deposit enclosed: \$ _____

PAYMENT

☐

Check payable to St. Joseph Church

☐

Credit card

☐

Please contact me about payment

☐

Other: _____

ACKNOWLEDGMENT

I understand the deposit terms above and authorize the parish to contact me regarding the columbarium project and completion of a final niche purchase agreement.

Signature _____

Date _____

RETURN TO: 163 Whisconier Road, Brookfield CT 06804

Parish Office 203.775.1035 | Email: andypacuk@gmail.com