



KENTUCKY CEMETERY ASSOCIATION



Application for Membership

I hereby make application for membership in the Kentucky Cemetery Association. Upon acceptance, I agree to abide by the Code of Ethics, Constitution and By-Laws of the Association and amendments hereto. I further agree to abide by all Kentucky State laws concerning cemeteries.

First Year's Dues for all members: \$75.00

Second Year and Beyond: \$100.00 per year for 25 or more burials.

Cemeteries with Less than 25 burials per year, Dues are \$25.00 per year

Supplier Dues: \$150.00 per year (includes Website Logo and Link)

All invoices mailed in January of each year

Complete the below and return with a check to: Kentucky Cemetery Association, 5364 Lexington Road, Lexington KY 40511

PLEASE PRINT OR TYPE

Cemetery

Supplier

Funeral Home

Crematory

Kentucky Corporation: Yes No

Total Number of Acres: _____ **Number of Interments per year:** _____
Cremations: _____

Is the Cemetery: Non Profit: **For Profit:** **Municipal:** **Church:**

Name of Applicant: _____ **Title:** _____

Name of Cemetery or Supplier: _____

Email Address: _____

Mailing Address: _____ **State:** _____ **Zip Code:** _____

Street Address if Different from Mailing: _____

Office Phone: () _____ **Cell Phone:** () _____

Do you Want a link to your Cemetery listed on our website? Yes **No**

Website address: _____

Signature: _____