

# Sunrise Presbyterian Church

## Application for Memorial Wall Plaque

The undersigned hereby applies to purchase a Memorial Plaque for inclusion on the Sunrise Presbyterian Church Memorial Wall in remembrance of the person listed below.

I understand that the Memorial Plaque shall be subject to the Columbarium and Memorial Garden Rules, Policies, and Regulation duly adopted by the session as amended from time to time and agree to be bound by such rules.

I understand that, once the application information is fully verified for eligibility and correctness of information, and pay has been received in full, the Memorial Plaque will be ordered and installed when the plaque is completed.

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number(s) \_\_\_\_\_

Relationship of the deceased to this Applicant: \_\_\_\_\_

### Memorial Plaque Information

**PRINT** the following information as you would like it to appear. **No titles may be used**, only the name. Two lines are permitted, one for the name and one for the dates. Only 23 characters per line are permitted including spaces.

Name of deceased: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Death: \_\_\_\_\_  
(mm/dd/yyyy) (mm/dd/yyyy)

**Applicant's Signature:** This signature below verifies that the inscription information given above is correct.

\_\_\_\_\_ Date: \_\_\_\_\_

Cost of Memorial Wall Plaque: \$800

Payment may be made by check to Sunrise Presbyterian Church or online at [www.oursunrise.org/give/](http://www.oursunrise.org/give/). Be sure to enter "Columbarium" in the memo space.

### For Church Use Only:

Date application and payment received: \_\_\_\_\_

Eligibility and Information Verified: By \_\_\_\_\_ Date: \_\_\_\_\_

Certificate for Memorial Wall Inscription (date) \_\_\_\_\_