

The Registrar
The Scottish Cremation Society Ltd
25 Bothwell Street
Glasgow
G2 6NL

Tel: 0141 567 4500 Fax: 0141 567 4535

PARTICULARS FOR INSERTION

(Block letters please)

SURNAME CHR	ISTIAN NAME(S)
DATES AND PARTICULARS OF EPITAPH REQUIRED	
Please note:- the maximum number of letters and spaces per	line is 40
Tidde tide that the maintain and of the or to	
Use this box for a five line entry	
	
SURNAME CHR	ISTIAN NAME(S)
1	
DATES AND PARTICULARS OF EPITAPH REQUIRED	
2	
3	
4	
5	
EMBLEM REQUIRED	
Please note:- the maximum number of letters and spaces per	line is 40
Tidde tide that the maintain and of the or to	
Please record this entry in the Book of Remembrance under date	£ . p
· (atata data of death)	
(state date of death)	•
And supplyMiniature Remembrance Book(s) or Remembrance	ce Card(s) .
Payment can be made via card to the Scottish Cremation Society office on 0141 567 or via cheque made payable to The Scottish Cremation Society Ltd.	4500
o. The stronger made payable to The Sociality Contained Society Etc.	

Continued overleaf/.....

Use this box for an eight line entry

SURNAME CHRISTIAN NAME(S) 1
DATES AND PARTICULARS OF EPITAPH REQUIRED 2
DATES AND PARTICULARS OF EPITAPH REQUIRED 2
2. 3. 4. 5. 6. 7. 8. EMBLEM REQUIRED.
3
3
4
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8. EMBLEM REQUIRED.
EMBLEM REQUIRED
Trease note: the maximum number of letters and spaces per line is 40
Name:
Address:
Postcode:
DateTelephone:

The Society reserves the right to vary any inscription as may be found necessary or to refuse an entry which is considered unsuitable. Cheques/Postal Orders should be payable to The Scottish Cremation Society Ltd.

Please send order form to:

The Registrar The Scottish Cremation Society Ltd 25 Bothwell Street Glasgow

G2 6NL

The Scottish Cremation Society Ltd is a charity registered in Scotland (SCO15310)

Opening hours for the Book of Remembrance Room are: (except 1 January & 25 December)

Monday - Friday: 10.00 am to 3.45 pm Saturday: 9.00 am to 12.45 pm Sunday: 11.00 am to 2.45 pm