



PARTICULARS FOR INSERTION (BLOCK LETTERS PLEASE)

Use this box for a two line entry

SURNAME:	CHRISTIAN NAME(S):
DATE AND PARTICULARS OF EPITAPH REQUIRED:	
Please note: the maximum number of letters and spaces per line is 40	

Use this box for a five line entry

SURNAME:	CHRISTIAN NAME(S):
DATE AND PARTICULARS OF EPITAPH REQUIRED:	
EMBLEM REQUIRED.....	
Please note: the maximum number of letters and spaces per line is 40	

Use this box for an eight line entry

SURNAME:	CHRISTIAN NAME(S):
DATE AND PARTICULARS OF EPITAPH REQUIRED:	
EMBLEM REQUIRED.....	
Please note: the maximum number of letters and spaces per line is 40	

Please record this entry in the Book of remembrance under date (state date of death)

.....

And supply.....Minature Remembrance Books(s) orRemembrance Card(s)

Your name.....

Your signature.....

Name: _____
Address: _____

Postcode: _____
Date: _____
Telephone: _____

The Society reserves the right to vary any inscription as may be found necessary or to refuse an entry which is considered unsuitable.

Card payments can be made by calling The Scottish Cremation Society Ltd office on 07818014027

Cheques to be made payable to The Scottish Cremation Society Ltd.

Please send order form to:

**The Scottish Cremation Society Ltd
4th Floor, The Reel House
7 West Regent Street
Glasgow
G2 1RW**

Tel: 0141 888 6644

Opening hours for the Book of Remembrance are:

Monday - Friday: 9:00 am to 3:45 pm
Saturday 9:00 am to 12:45 pm
Sunday 11:00 am to 2:45 pm
(Except 25 December & January 1, Closed)

Email: carol.morrison@azets.co.uk

The Scottish Cremation Society Ltd is a charity registered in Scotland
(SC015310)