

Date_____

UUC Memorial Garden Right to Inter or Scatter Cremains Proof of Purchase

The first step for you as a prospective Subscriber is to read the *Subscriber's Checklist for Cremains Interment or Scattering*. A link to the UUC Memorial Garden *Policies and Procedures*, and the names of the current officers (Liaison, Registrar, and Caretaker) who will be assisting you, are on the UUC Web site www.uucnrv.org. The UUC Administrator will provide assistance if needed.

Please print all information clearly. (If a niche, put in number; x for scattering)

Niche no. _____ Scattering____ Amount \$ _____ check no. _____

Purchased by_____, **Subscriber**

Subscriber Address _____

Street, town or city, state and zip

Telephone nos._____ E-mail _____

Alternate contact person_____

Address _____

Street, town or city, state and zip

Telephone nos._____ E-mail _____

Memorial Garden Liaison_____

Address _____

Street, town or city, state and zip

Telephone nos._____ E-mail _____

Signatures:

Subscriber _____ Liaison _____

ORIGINAL (Make one photocopy of this side only and store in UUC MG records)

UNITARIAN UNIVERSALIST CONGREGATION MEMORIAL GARDEN

1301 Gladewood Drive, Blacksburg, VA 24060

Mailing address: POBox 10116, Blacksburg VA 24062-0116

Web site: www.uucnrv.org E-mail: administrator@uucnrv.org

Finalized 06/14/11