



Seafield Crematorium Request for Entry in Book of Remembrance

Edinburgh Crematorium Ltd
The Lodge, Seafield Cemetery
Seafield Place, Edinburgh EH6 7QP

Name of deceased:	Date of death:
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Name:	
Address:	
Tel No:	

		Cost:
Details of entry:	2 lines/5 lines/ 8 lines	£
Floral emblem/badge/crest (please specify)	yes/no	£
Remembrance card (inscription only)	yes/no	£
Remembrance card with floral emblem/badge/crest	yes/no	£
Mini book of remembrance (inscription only)	yes/no	£
Mini book of remembrance with floral emblem/ badge/crest	yes/no	£
Other	yes/no	£
	Total	£

Name (surname first):

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36		
Line 1																																						

Inscription:

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	
Line 2																																					
Line 3																																					
Line 4																																					
Line 5																																					
Line 6																																					
Line 7																																					
Line 8																																					

- 1) Please ensure each line contains no more than 36 characters and/or spaces
- 2) Please write the inscription clearly in block capitals
- 3) As the form will be sent direct to the craftsmen for copying into the Book of Remembrance, please check dates, etc carefully as we cannot rectify mistakes afterwards
- 4) Please double check that all names and dates are correct
- 5) We reserve the right to vary any inscription as we find necessary, or refuse an entry we consider unsuitable

I have checked that the names and dates are correct. I understand that the entry cannot be altered in the event of a mistake

Signature Date

For office use only	<input type="checkbox"/> Rec'd	<input type="checkbox"/> Checked	<input type="checkbox"/> Inscribed
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