



HEAD OFFICE
12 Carlton Crescent, Kingston 10
 876 960-2961-2 Fax: 876 929-2394
 Cemetery: 876 943-0159

info@meadowrest.com

AUTHORIZATION FOR INTERMENT
APPLICATION FORM - ADULT

MMG N^o.

DATE / /
DD MM YYYY

THE REMAINS OF _____ MALE FEMALE
SURNAME MIDDLE FIRST
 FORMERLY OF ADDRESS _____

DATE OF BIRTH / / DATE OF DEATH / / DEATH CERTIFICATE # _____
DD MM YYYY DD MM YYYY

FUNERAL HOME _____ DAY & DATE OF BURIAL _____
DAY DD MM YYYY

HEADSTONE VERSE _____

CHURCH AFFILIATION _____ FUNERAL SERVICE AT MMG CHAPEL YES NO ORGANIST YES NO MINISTER YES NO

EXPECTED TIME OF ARRIVAL AT MMG _____ FUNERAL TIME _____

VAULT SELECTION

VAULT NUMBER: _____

BASIC VAULTS											
SINGLE ADULT			SINGLE ADULT EXTRA ENLARGED			FULL DOUBLE (LOWER & UPPER)			HALF DOUBLE		
<input type="checkbox"/> OPTION 1	<input type="checkbox"/> OPTION 2	<input type="checkbox"/> OPTION 3	<input type="checkbox"/> OPTION 1	<input type="checkbox"/> OPTION 2	<input type="checkbox"/> OPTION 3	<input type="checkbox"/> OPTION 1	<input type="checkbox"/> OPTION 2	<input type="checkbox"/> OPTION 3	<input type="checkbox"/> OPTION 1	<input type="checkbox"/> OPTION 2	<input type="checkbox"/> OPTION 3
PREMIUM VAULTS											
SINGLE ADULT			SINGLE ADULT EXTRA ENLARGED			FULL DOUBLE (LOWER & UPPER)			HALF DOUBLE		
<input type="checkbox"/> OPTION 1	<input type="checkbox"/> OPTION 2	<input type="checkbox"/> OPTION 3	<input type="checkbox"/> OPTION 1	<input type="checkbox"/> OPTION 2	<input type="checkbox"/> OPTION 3	<input type="checkbox"/> OPTION 1	<input type="checkbox"/> OPTION 2	<input type="checkbox"/> OPTION 3	<input type="checkbox"/> OPTION 1	<input type="checkbox"/> OPTION 2	<input type="checkbox"/> OPTION 3
PLATINUM PREMIUM VAULTS						COLUMBARIUM					
SINGLE ADULT			SINGLE ADULT EXTRA ENLARGED			NICHE #: _____					
<input type="checkbox"/> OPTION 1	<input type="checkbox"/> OPTION 2	<input type="checkbox"/> OPTION 3	<input type="checkbox"/> OPTION 1	<input type="checkbox"/> OPTION 2	<input type="checkbox"/> OPTION 3						

NAME OF PURCHASER _____ RELATIONSHIP _____

MAILING ADDRESS _____ TEL. (work) _____
 _____ (cell) _____
 _____ EMAIL _____

I hereby certify and represent that I have the right to make this authorization and I agree to hold Meadowrest harmless from any liability on account of said authorization for this interment, and to pay before interment the sum of \$ being the agreed charges.

SIGNATURE: _____

FOR HEAD OFFICE USE ONLY

PAYMENT TERMS

PAYMENT \$ _____ CASH CHEQUE CARD OTHER RECEIPT N^o. _____

DATE / /
DD MM YYYY

BOOKED BY _____ CONFIRMED BY _____ DATE <u> </u> / <u> </u> / <u> </u> <small>DD MM YYYY</small> MMG EMP. _____	HEADSTONE ORDERED <u> </u> / <u> </u> / <u> </u> <small>DD MM YYYY</small> RECEIVED <u> </u> / <u> </u> / <u> </u> <small>DD MM YYYY</small> INTERMENT DATA CARD ISSUE DATE <u> </u> / <u> </u> / <u> </u> <small>DD MM YYYY</small>
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Kindly note and agree to the terms and conditions of this interment, these are listed on the back of the form.



TERM AND CONDITIONS

KINDLY NOTE THE FOLLOWING TERMS AND CONDITIONS OF PURCHASE:

NOISE POLICY

At the Gardens, we have a zero-tolerance policy for noise. If any vehicle or person is observed playing music or being otherwise unduly noisy, said vehicle or person will be removed from the Gardens or denied entry.

DIMENSIONS FOR VAULTS

Single	92" X 32"
Double Vaults Upper Level	92" X 34"
Double Vaults Lower Level	92" X 32"
Adult Size +	92" X 40"

KINDLY ENSURE ALL CASKETS ARE MADE TO FIT THE DIMENSIONS FOR THE VAULTS AS STATED ABOVE.

PROPERTY MAINTENANCE

At Meadowrest our goal is to provide a clean, tranquil, solemn and uniformed space for you to lay your loved ones. In this regard, the following are not allowed in the Gardens:

- a. Placement of objects on or around the graves/headstones such as sculptures e.g. angels
- b. Installation of grill work or fencing
- c. Placement of artificial flowers, flower pots or the planting of flowers
- d. Modification or customization of headstones

Disallowed items will be removed and destroyed.

VERSE ON HEADSTONE

Where a verse for headstone is not selected, this standard verse is used: *MAY HIS/HER SOUL REST IN PEACE*

I hereby certify and agree that I have read Meadowrest's policy re: noise policy, property maintenance and verse on headstone. I agree to observe these rules. I understand that failure to observe them could result in me being barred from entry or being removed from the property. I further understand that all disallowed objects will be removed from the Gardens.

Kindly sign below indicating your acceptance of the terms and conditions.

NAME:

SIGNATURE:

DATE: