

REMEMBRANCE BOOK ORDER FORM

C/No _____

Name of deceased _____

Date of original entry in the Book of Remembrance _____

Please supply _____ (amount) Grey Suede Remembrance Book(s)

Please note that books can only be supplied to the person who arranged for the original entry for the Book of Remembrance.

If you already have a Remembrance Book supplied by the Crematorium, please return it with this application for the additional inscription to be added.

Name of applicant: _____

Address: _____

Postcode: _____

Email address: _____

Daytime telephone number (inc. area code) _____

Signature: _____ Date: _____

Payment can be made by cheque (payable to Peterborough City Council), Cash or Debit / Credit Card.
Our postal address is Peterborough Crematorium, Mowbray Road, North Bretton, Peterborough, PE6 7JE.



The personal information that you provide on this form will be handled by Peterborough City Council in accordance with the Data Protection Act 1998. We do not pass on your details to any third party without your knowledge unless the Council is legally obliged to do so.

Applicant details checked _____

Date ordered _____

Date acknowledged _____

Date received/posted _____