

NICHE(S) # _____

TRINITY EPISCOPAL CHURCH COLUMBARIUM

Inscription Order Form

TO TRINITY EPISCOPAL CHURCH, BLOOMINGTON, INDIANA:

Subject to the Rules for Use of the Trinity Episcopal Church Columbarium, you are hereby requested and authorized to have placed upon the niche front tablet of niche(s) number _____, in which the cremated remains of _____ have been, or are scheduled to be interred, the engraved inscription in the form and wording as indicated below:

(Suffix such as Jr. or II may be included. Prefix such as Rev. or Dr. or suffix such as Ph.D. or MD may not be included)

SINGLE NICHE (for 1 or 2 urns)

Last name _____

First and middle name _____

Year of birth – Year of death _____

2nd last name _____

First and middle names _____

Year of birth – Year of death _____

(Signature required next page)

Inscription Order Form

TWO ADJOINING NICHEs (for 2, 3, or 4 urns)

Last name for both niches _____

Left Side of Niche

First and middle name _____

Year of birth – Year of death _____

First and middle name _____

Year of birth – Year of death _____

Right Side of Niche

First and middle name _____

Year of birth – Year of death _____

First and middle name _____

Year of birth – Year of death _____

My signature below certifies the correctness of this inscription form and text, and any changes shall be at my expense.

I acknowledge that Trinity Episcopal Church has set a standard font and style of all niche plates for uniformity and agree to this design.

Signed _____

Signed _____

Date _____