APPLICATION FOR A PLAQUE ON THE MEMORIAL TABLET IN THE COLUMBARIUM OF

BLACKSBURG PRESBYTERIAN CHURCH BLACKSBURG, VIRGINIA

NAME THAT WILL APPEAR ON THE PLAQUE:
DATE OF BIRTH:
DATE OF DEATH:
THE MEMORIAL PLAQUE IS FOR THE MEMORY OF LOVED ONES AND FRIENDS WHO ARE INTERRED ELSEWHERE. EACH PLAQUE WILL LIST THE NAME OF ONE PERSON, TOGETHER WITH HIS/HER DATE OF BIRTH AND DATE OF DEATH. THE UNDERSIGNED AGREE (S) THAT THE RULES AND REGULATIONS FOR THE COLUMBARIUM, BLACKSBURG PRESBYTERIAN CHURCH, BLACKSBURG, VIRGINIA, AS THEY MAY BE AMENDED FROM TIME TO TIME, SHALL GOVERN THE USE OF A PLAQUE ON THE MEMORIAL TABLET.
DATE:
SIGNATURE(S):
IN CASE OF MY INCAPACITY, THE FOLLOWING PERSON IS AUTHORIZED TO EXECUTE
MY WISHES REGARDING THIS PLAQUE.
NAME:
ADDRESS: