

The Columbarium of First Presbyterian Church

301 Pekin Street
Lincoln, Illinois 62656

Application to Purchase a Right of Inurnment

(Please Print Clearly - Separate Application Required for Each Niche)

Full Name of Applicant: _____

Street Address: _____

City, State, Zip: _____

Telephone:() _____ E-Mail: _____

Niche Requested (Subject to Approval): Number _____

Eligibility for Purchase: FPC Member ____; OR Former FPC Member ____ in years ____--____;

OR Relative of FPC Member (name) _____

Relationship _____

Full Name(s) of Eligible Person(s) Who Will be Inurned:

Person 1: Name

Address _____

City, State, Zip _____

Relationship to Applicant _____

Person 2: Name

Address _____

City, State, Zip _____

Relationship to Applicant _____

Terms of Purchase:

1. Full Payment of **\$600** Submitted with Application by: Check (# _____) OR other: _____

2. The Applicant agrees that the Columbarium Rules, Policies and Regulations governing operation of the Columbarium as now existing or which may exist in the future are a part of this application for all purposes, and acknowledges receipt of a copy of the existing Rules, Policies and Regulations.

3. The Applicant understands and acknowledges that First Presbyterian Church and its authorized agents and representatives shall be liable only for acts of gross negligence and intentional wrongdoing, and in no event shall any such party be liable for any monetary awards in excess of the reservation fee paid by the applicant.

Applicant's Signature: _____ Date: _____

For Office use:

Application Received by: _____ Date _____

Application Approved by Columbarium Committee: Date _____ Certificate No. _____

Individual Niche Inscription Order Form

Niche Number _____

To the Columbarium Committee of First Presbyterian Church, Lincoln, IL :

Subject to the Rules, Policies, and Regulations of the Columbarium Committee, you are hereby requested and authorized to have placed upon the plaques covering Niche Number: _____ in which the remains of: _____ and

_____ have been or are registered to be inurned, the engraved inscriptions as follows:

Inscription for First Plaque (please print carefully):

Name: _____
(First, Last) OR (First, Middle, Maiden, Last) OR (First, Middle-Initial, Last)

Date of Birth: _____ Date of Death: _____
(Month, xx, xxxx) (Month, xx, xxxx)

If deceased, remains: _____ are available; OR _____ are not available for inurnment. Date of Inurnment: _____

Inscription for Second Plaque (please print carefully):

Name: _____
(First, Last) OR (First, Middle, Maiden, Last) OR (First, Middle-Initial, Last)

Date of Birth: _____ Date of Death: _____
(Month, xx, xxxx) (Month, xx, xxxx)

[If deceased, remains: _____ are available; OR _____ are not available for inurnment] [Date of Inurnment: _____]

I/We request that the First Plaque _____ OR Second Plaque _____ OR First to Die _____ be located in the upper position on the niche face. (If only one plaque, it will be centered.)

Additional Inscription for Face Plaque (please print carefully):

I certify that the above inscription text is correct and any changes shall be made at my expense.

Signed: _____ Date: _____

Authority for request (check one): ___ Owner of Right; ___ Owner's Heir; ___ Executor; OR ___ Administrator.

Complete all information requested above.

Acknowledged for the Columbarium Committee:

Signed _____ Date _____ Certificate No. _____

Please return completed applications to:

First Presbyterian Church
301 Pekin Street
Lincoln, IL 62656