

ALL SAINTS ANGLICAN CHURCH

Hot Springs Village, Arkansas

Exhibit D - April 27, 2017

MEMORIAL GARDEN INURNMENT PLOT PURCHASE FORM

All Saints Anglican Church Memorial Garden of the Good Shepherd is intended for the inurnment of the cremains of members of All Saints Anglican Church and the loved ones of the immediate family. Immediate family members are limited to: spouse, children, step-children, adopted children, mother, father, grandmother and grandfather.

The All Saints Anglican church member, next of kin, or executor (with legal documentation) is requesting a plot purchase for the inurnment of:

(Name of Person to be inurned)

Plot requestor's Name: _____ Phone _____

Relationship to the person to be inurned: _____ (self, spouse, next of kin, executor)

Requestor's Address: Street: _____

City: _____ State: _____ Zip: _____

Assigned Plot Location: _____

_____ Date: _____ making

Signature

Signature evidences receipt and agreement to the Policies and Regulations set forth for the All Saints Anglican Church Memorial Garden. (Copy of Exhibit "A" – Policies and Regulations attached)

Available plot may be purchased prior to death, and individual plots or family groupings may be secured by making a minimum purchase fee of \$500 for each plot. A separate Memorial Garden Inurnment Plot Purchase Form must be filled out for each person planned to be inurned in the Memorial Garden. Any amount to purchase a plot over the \$500 may be considered a tax deductible donation and will be used for the perpetual care and maintenance of the Memorial Garden.

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Inurnment Plot Purchase Form (continued)

Primary Next of Kin Contact Information:

Name: _____

Address: _____ State: _____ Zip Code: _____

Phone Number: _____ Cell Phone: _____

Secondary Next of Kin: _____

Address: _____ State: _____ Zip Code: _____

Phone Number: _____ Cell Phone: _____

Engraved Granite Memorial Stone Inscription

Please PRINT legibly:

Line One: First and Middle Name of the Deceased: _____

Line Two: Last Name of the Deceased: _____

Line Three: Date of Birth: _____ Date of Death: _____

Month (as Jan., Feb., Mar. etc.)

Date (XX), Year (XXXX)

Line Four: Scripture Verse: i.e. REV. 2:10 _____

Or

Memorial: i.e. Best Mom Ever _____

All Saints Anglican Church is not responsible for errors in the final inscription based on the above information. All Inscriptions must be approved by the Memorial Garden Administrators. Editing of the inscription may be necessary to fit on the stone.

Inscription approved: _____ Date: _____

Memorial Garden Administrator

Inscription approved: _____ Date: _____

Next of Kin

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Inurnment Plot Purchase Form (continued)

Stone to be prepared and placed on the plot prior to death, with the date of death to be added later. The stone will be temporarily removed to enable the engraver to add the Date of Death. The cost of this second engraving is included with the plot purchase price.

An Inurnment Service will be provided by the Pastor of All Saints Anglican Church. The Pastor does not expect a fee for this service; however an honorarium may be given if desired. Arrangements for the service shall be handled through the Memorial Garden Administrator in liaison with the church Pastor.