



NORTH EAST SURREY CREMATORIUM

BOOK OF REMEMBRANCE

FOR OFFICE USE

Receipt No: _____

Checked: _____

Inscribed: _____

Please record the entry as overleaf in the Book of Remembrance at the North East Surrey Crematorium

Under date (usually date of death) Fee £

Upon completion please supply in addition copies of the above entry in:

- | | | |
|---------------------------------------|------------------------|-------------|
| (a) Miniature Book vellum bound | | Fee £ |
| (b) White Memorial Card(s) | Number }
Required } | Fee £ |
| (c) Folded Memorial Card(s) | | Fee £ |

.....
Remittance enclosed £

Signed (Mr., Mrs. or Miss)
 Address Telephone
 Post Code Date

Cheques/P.O.'s should be made payable to the North East Surrey Crematorium Board and sent to
The Registrar, North East Surrey Crematorium, Lower Morden Lane, Morden Surrey, SM4 4NU.
 Phone 020-8337 4835. Fax 020-8337 8745 Email nescb.crematorium@talk21.com

WORDING OF INSCRIPTION DESIRED
(IN BLOCK LETTERS PLEASE)

We recommend not more than 32 letters and/or figures should be included in one line of entry.
(Over 32 letters the lettering has to be noticeably reduced)

	First line: SURNAME	CHRISTIAN NAMES
1		
2		
3		
4		
5		
6		
7		
8		

Please complete the particulars overleaf.