

CHOBHAM & WEST END JOINT BURIAL COMMITTEE

APPLICATION FOR INTERMENT IN CHOBHAM CEMETERY

Full Name of Deceased: Sex: M/F

Rank, Profession or Designation:

Place of Abode:

Place of Death:

Date & Cause of Death: Age:

Burial Plot Number: Burial Grant Number:

If the Burial Grant is not available, please provide name and address of Grantee:

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Date & Time of Interment:

Name of Minister/Person Officiating:

Depth of Grave: Double/Single Coffin Dimensions:

If ex-parishioner, address and dates of residency in Chobham or West End:

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Please familiarise yourself with the Chobham Cemetery Regulations (www.Chobham.net/parish)

Name:

Signature: Date

Please make cheques payable to *CHOBHAM & WEST END JOINT BURIAL COMMITTEE*, and return to:

The Clerk, Chobham & West End Joint Burial Committee, Parish Pavilion, Recreation Ground, Station Road, Chobham, Surrey GU24 8AZ

Telephone: 01276 856633; Email: Suggestion Box Page Fax: 01276 857788

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Office Use: RoPG: RoG:

BG No: RoB: