

Rainbow Garden

Please complete the form in BLOCK Capitals and return with your payment to **The Manager, Bereavement Services, Tixall Road, Stafford ST18 0XZ.**
Please make cheques payable to Stafford Borough Council.

I hereby request you to open grave number

at Tixall Road Cemetery, for the burial of the late:

NAME	
DATE OF BURIAL	
DATE OF DEATH	AGE

I undertake to indemnify you against all claims, damages or expenses which may arise from your complying with this request.

Chapel required? YES NO

HYMNS	
<input type="text"/>	
MINISTER	
SIGNATURE	
PRINT FULL NAME	
ADDRESS	
<input type="text"/>	
POSTCODE	
TEL	DATE
EMAIL	

I enclose a cheque/postal order for

£ <input type="text"/>

Office Use

INTERMENT FEE £	PURCHASE REG
PURCHASE	DEED ISSUED
CHAPEL	GRAVE REG
TOTAL£	BURIAL REG