

## FIFTH AVENUE PRESBYTERIAN CHURCH

## **Application for**

## CERTIFICATE OF RIGHT OF COMMEMORATION

I hereby apply to Fifth Avenue Presbyterian Church, New York, New York, for a Certificate of Right of Commemoration (without any right of inurnment) in the Fifth Avenue Presbyterian Church Columbarium.

I have read and agree to abide by the Terms and Conditions attached to this Application.

Name \_\_\_

Home Address	
Home Phone	Cell Phone
Email	
Church Affiliation	
Date of Birth	Place of Birth
	Next of Kin or Legal Representative Information
Name	
Address	
Phone	Email
	Executor Information
Name	
Address	
Phone	Email

I request the following Memorial Plaque(s) in the Columbarium, subject to the approval of this Application.

If currently known, please indicate the designee to be commemorated for each Memorial Plaque,
together with his/her date of birth (DoB) and date of death (DoD).

Memorial Plaque #	Designee	DoB:	DoD:		
Memorial Plaque #	Designee	DoB:	. DoD:		
Memorial Plaque #	Designee	DoB:	DoD:		
Memorial Plaque #	Designee	DoB:	DoD:		
Special Instructions (if any)					
•	•				
Signature		Date			