Cokes Chapel Cemetery Request

Family Plot Name and number:		
Person requesting space:		
Current Address		
City	St Zip	
Phone Email		
Primary next of kin		
Phone		
Member of Church ☐ Yes ☐ No	Plot sketch from trustees	
Existing Plot/Space # or		
New Request New Location(s) requesting # How many New Gravesites or New Spaces Requesting 1 1 2 1 3 1 4 other Gravesite for Casket Gravesite for Cremains Bench Space for Cremains in Cemetery Bench Space Memorial Walkway		
Preference of Funeral Home/Director		
Additional Instructions		
I have received, read, and agree to the Cokes Chapel UMC Cemetery Ri representative of the Church to identify the location of the cemetery space plot. DateSignature	ce requested or confirmed the space o	of an existing family
Fees : Make checks payable to Cokes Chapel UMC, Cemetery FundMember New Space \$500Member Memorial Walkway Space \$250Cremains Placement Fee for existing family burial plot \$250Non-member, new space \$1,500		
Below to be completed by Trustees or Cemetery Committee designate	9	
Plot # Location of Burial or Bench Space # Date of burial or placement		
Date PaidAmount Rec. \$		