



APPLICATION FOR RESERVATION OF NICHES In the Calvary Lutheran Columbarium

I/we hereby apply to reserve _____ companion niche(s) in the Calvary Lutheran Church Columbarium. I understand that this application is subject to approval by the Columbarium Committee. I also understand that if this application is accepted, the purpose and use of the niche(s) will be subject to the Columbarium Bylaws. I have been furnished and have read a copy of the bylaws and understand that the bylaws may be changed at any time by the Columbarium Committee and Church Council without notice.

APPLICATION INFORMATION:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Primary phone: _____ E-mail _____

Number of Niches: _____ Price per niche: \$1850 Total Due: _____

Location preferred: Niche Number _____
(Location of niches will be assigned by the Columbarium Committee by location preferences in order in which the full payment is received.)

___ I enclose a check in the total amount above made payable to Calvary Lutheran Church.

___ I enclose a check for \$200 to start the quarterly payment plan.

(Date)

(Signature of Applicant)

Approved by Columbarium Committee

(Date)

(Columbarium Committee Signature)