



**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.

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Applicant)

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Approved by Columbarium Committee

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Columbarium Committee Signature)