

Crem No:
Receipt No:.....

BOOK OF REMEMBRANCE APPLICATION

Please fill in your details below:

NAME (Mr/Mrs/Miss/Ms)

Address:

.....

Tel No: Date:

Book of Remembrance Entry:	£
Floral Emblem, Badge or Crest:	£
Remembrance Cards x	£
Miniature Books x	£
Triplicates	£

Total: £

(Cheques/Postal Orders should be made payable to Slough Borough Council)

Signed:

APPLICATION FOR AN ENTRY IN THE BOOK OF REMEMBRANCE

RED & BLACK

GOLD & BLUE

Please write clearly in block letters

Date of Entry: (Can be the date of death, an anniversary or a birthday)

Illustration (such as a flower, badge or hobby/interest):
(you may need to provide an example of the illustration you require)

Surname

Forenames

1.
2.
3.
4.
5.
6.
7.
8.

No more than 32 letters/figures to each line