

ST+BARTS

EPISCOPAL CHURCH

We are delighted that you have chosen St. Bartholomew's Memorial Garden as your final resting place.

To ensure you place, please complete the following Memorial Garden Application form.

We also ask that you read the attached *Memorial Garden Guidelines* governing interment in the Memorial Garden and retain it for your records.

Please note that the fee for the placement of ashes in the Memorial Garden is \$500.

Please be sure to return your application and payment to the Parish Office.

Memorial Garden Application

Memorial Garden
Reservation for: _____

Date of Birth: _____ Date of Death: _____

Name of a designee
to act on behalf of
applicant: _____

Phone: _____ Email: _____

The right to be interred in St. Bartholomew's Episcopal Church Memorial Garden, 11265 SW Cabot St. Beaverton, OR 97005 is subject to the terms and conditions specified in the Policies, Procedures and Regulations which now exist or which may be adopted hereafter governing the use of the Memorial Garden. The undersigned acknowledges that no use may be made of the space in the Memorial Garden until payment for the space has been paid in full.

The undersigned further certifies that he or she is duly authorized to make these arrangements.

Signature of Applicant _____ Date _____

Signature of Approver _____ Date _____

For Office Use

Date Application
Received: _____

Date Payment
Received _____



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