



The Memorial Garden of Madison Christian Community

ADVENT LUTHERAN CHURCH ~ COMMUNITY OF HOPE

APPLICATION

I/We hereby make formal application to the Madison Christian Community Memorial Garden Board of Trustees to purchase a plot. I/We have read the bylaws of the Memorial Garden and agree to adhere to them in making this application.

Section 1: Applicant Information

Fill out one section for each person applying. Please make sure to include full names. Other information is optional.

Name: _____

Name on memorial stone:

Inscription on memorial stone:

	Date	Church, City, and State
Birth	_____	_____
Baptism	_____	_____
Confirmation	_____	_____
Marriage	_____	_____

Dates of MCC membership, from _____ to _____
Member of _____ Advent Lutheran Church ELCA or _____ Community of Hope UCC

Name: _____

Name on memorial stone:

Inscription on memorial stone:

	Date	Church, City, and State
Birth	_____	_____
Baptism	_____	_____
Confirmation	_____	_____
Marriage	_____	_____

Dates of MCC membership, from _____ to _____
Member of _____ Advent Lutheran Church ELCA or _____ Community of Hope UCC

Section 2: Selecting Your Plot Type and Location

Select the type of plot from the list below. Indicate your choice, by placing an "x" next to the type of plot. All plots include burial and the memorial stone.

Single Plot _____
\$700

Double Plot _____
\$900

Triple Plot _____
\$1100

Quadruple Plot _____
\$1300

Communal Plot _____
\$200
uncontained cremains
only, to be placed in the
center communal plot

Memorial Stone Only _____
\$400
no cremains

Place an "x" next to how you wish your cremains to be buried.

Uncontained _____

Contained _____

Using the map located in your information packet, indicate your first, second, and third plot choices by writing the plot numbers in the lines below.

First Choice _____

Second Choice _____

Third Choice _____

Section 3: Method of Payment

Please select your method of payment.

_____ Payment in full is enclosed.

_____ One-half of the payment is enclosed. The remainder of which will be paid within one year of this application.

Total amount enclosed: \$ _____

Signed: _____ Date: _____

Signed: _____ Date: _____

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