

**Burial Site Request – St. Matthew’s Church**

**Date:** \_\_\_\_\_

**Name of person making application:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone:** \_\_\_\_\_

**Application is being made on behalf of:** \_\_\_\_\_  
(self or other = name)

**Interment:** \_\_\_\_\_ whole-body burial      \_\_\_\_\_ cremation

**Requested Site:** Section #: \_\_\_\_\_

Gravesite #: \_\_\_\_\_

Memorial Garden: \_\_\_\_\_

**Category of Eligibility:**

- \_\_\_\_\_ 1. Active member of St. Matthew’s Church, spouse or minor children
- \_\_\_\_\_ 2. Person to whom specific commitments for burial have been made by the vestry prior to the adoption of burial statement
- \_\_\_\_\_ 3. Spouse of person previously buried in the cemetery
- \_\_\_\_\_ 4. Other, who can demonstrate strong ties to St. Matthew’s or to families with members buried in the churchyard.

Explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Applicant should sign:** “I have received a copy of the Cemetery Policy.”

**(Signature)** \_\_\_\_\_

**Application fee to accompany this request: \$200 for each cremation burial site request; \$500 for each whole body burial site.**

**Date of approval:** \_\_\_\_\_

(One copy is to be returned to applicant, one copy kept on file in the Church Office.)