

COLUMBARIUM USE AGREEMENT
Calvary United Methodist Church
3701 Hillsboro Road
Nashville, TN 37215

Calvary United Methodist Church has received from _____ (hereinafter called the "Member") the sum of \$_____ and grants the Member the exclusive right and privilege to inurn and/or scatter the ashes of the following person (s) in the option selected: *(Please print the following names as you wish them to appear on the Columbarium niche name label. DOB is Date of Birth, NL is Niche Location)*

Name: _____ **DOB:** _____ **NL:** _____

Name: _____ **DOB:** _____ **NL:** _____

Name: _____ **DOB:** _____ **NL:** _____

Name: _____ **DOB:** _____ **NL:** _____

Please select from the following options (a niche will contain 4 urns):

Niche Number _____ of the Calvary Columbarium with _____ urn (s) (maximum 4)
(In-ground niche:) or (Above ground niche:)

Bury biodegradable container (s) in the Scatter Garden of the Calvary Columbarium

Scatter ashes in the Scatter Garden of the Calvary Columbarium

I have read the *Regulations Governing Calvary United Methodist Church Columbarium* dated _____ and agree to abide by the terms and conditions stated therein.

Signature Member _____ Date: _____

(If applicable) Spouse _____ Date: _____

Mailing Address: _____

Phone Number: (____) _____

(For Internal Use Only)

Received

and

Approved By: _____

Date: _____

For Calvary United Methodist Church