Book of Remembrance and Remembrance Cards Application Form
The Book of Remembrance is a permanent memorial to commemorate the life of a loved one. The entry is displayed every year on the anniversary date you select, but can be viewed at any other time by arrangement. You can select from 2 lines upwards, and include a motif, crest, or badge with more than 5 lines.

Charges vary depending on the number of lines or if you wish to include a motif, crest or badge. Current costs are shown on the enclosed price list.

Please do not forget to add the date for the page you would like the entry included on. As the book for each quarter is sent away in advance, we must ask that you apply for entries in the Book of Remembrance at least 6 months before your required date to ensure it is entered accordingly.

Where there is no motif etc the NAME ONLY line must be shown as the surname and then first name(s) of the person who the entry is for. Please only use one character per box, then one box between each word, using both the white and grey boxes. Entries should not exceed 40 characters/ spaces per line.

Where there is a motif, crest or badge the NAME ONLY line must be shown as the surname and then first name(s) of the person who the entry is for. Please only use one character per box, then one box between each word, using the white boxes only. Entries should not exceed 35 characters/ spaces per line.

The Council reserves the right to vary any inscription or to refuse an entry in the Book of Remembrance if necessary or deemed inappropriate.

Motif: ........................................................................................................................

[State Colour and type of the natural subject if a picture is not attached]

Crest or Service Badge of: ......................................................................................

Name [Block Capitals]: ............................................................................................

Address: ..................................................................................................................

..................................................................................................................................

.....................................................................  Post Code ..........................................

Signature of Applicant: ............................................................................................

Contact phone number: ...........................................................................................

Email address: .........................................................................................................
We will only permit entries on 11 November, 25 December, 1 January and 14 February where it is the anniversary for date of death.

<table>
<thead>
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<th>Date / Month of entry</th>
<th>Name Only</th>
<th>Surname</th>
<th>First Name(s)</th>
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</table>
**Book of Remembrance**

Date / Month of Entry ..........................................................................................................................

Entry Fee £ ........................................

Supply copy on Remembrance Card(s) £ ........................................

Supply copy in Personal Book(s) of Remembrance £ ........................................

Total £ ........................................

**PAYMENT** (we are unable to accept cash)

Please return your completed application form with the appropriate fee.

☐ I wish to pay by cheque and enclose a cheque made payable to BCKLWN

☐ I wish to pay by debit / credit card and ask you telephone me on .............................................. during normal office hours to make payment or I will bring the application and make payment in person to the Mintlyn office.

☐ I wish to be invoiced to the address shown overleaf (only for values of £100 or more)

Please note our office is open Monday to Friday from 9:00am to 4:45pm excluding Bank Holidays

**Office Use only**

Date Recd: .............................................. Checked: ..............................................

Cremation Ref No: ................................ Receipt No: ..............................................

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**GDPR statement**

The Borough Council of Kings Lynn & West Norfolk has a duty to process and store your personal information safely and securely in line with data protection legislation, which here means the General Data Protection Regulations (Regulation (EC) 2016/679 which is in force from 25 May 2018) (GDPR) and any national implementing laws, regulations and secondary legislation, as amended or updated from time to time, in the UK and then any successor legislation to the GDPR. You may see copies of the data held about you and ask for it to be corrected or deleted. You can find more information about Data Protection and the Council’s Data Protection Officer, on our website. See www.west-norfolk.gov.uk/dataprotection

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**Mintlyn Crematorium**

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Tel: (01553) 630533 Fax: (01553) 630998
Email: mintlyn@west-norfolk.gov.uk

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communication for all

Borough Council of
King’s Lynn &
West Norfolk

www.west-norfolk.gov.uk

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