## **OUUC REQUEST FOR COLUMBARIUM INTERMENT**

Date of Reques	t	
Deceased's Leg	al Name	
Deceased's Dat	e of Birth	Place of Birth
Deceased's Dat	e of Death	
Requestor's Name		Phone
•	tionship to OUUC:	Applicant's relationship to OUUC:
□ Member		□ Member
□ Pledging Friend		<ul><li>Pledging Friend</li></ul>
□ Other		□ Other
_ Y	es. I will make arrange	ce to inter the cremains at the columbarium? ments with the minister and memorial services committee. ster to help me inter the cremains privately.
	_	n engraved name plate to be added to the OUUC entative will provide you with further details and
□ <b>Y</b>	'es	□ No
		file of the deceased's name, date of birth, date of ou give your permission to make this information
=	_	is information could help with future genealogy
searches.		
□ <b>Y</b>		□ No
_	_	a donation to OUUC which is responsible for
maintenance		en? If "yes" please make payments to OUUC.
Acknowledge		
□ I have re	ead and agree to comply	with the "Policies and Procedures for Columbarium." trol disposition of the cremains of the deceased person
named above.		
except its own by the element	willful neglect or miscones, by vandals, by accide	t be liable for loss or damage to cremains from any cause, duct, and especially shall not be liable for damage caused ats, or by mishaps beyond its reasonable control. OUUC is appliance with RCW 68.50.160 Right to control disposition of
S	Signature	Date
******	********	***************
FOR	ADMINISTRATIVE USE (	DNLY:
□ R	Request Approved	
	<ul> <li>Date Interred in C</li> </ul>	
		d for name plates
_ 5		nts or Instructions
⊔ R	Request Denied  o Reason for Denial	
	o reason for beinar	