

CREMATION SERVICE INSTRUCTION FORM

 ${\bf Email\ completed\ form\ to:}\ \underline{bookings@pinegrovecrem.com.au}$

FUNERAL COMPANY	Branch:
Email:	
DECEASED DETAILS Booking Number:	
Full Name Of Deceased:	
DOB: DOD:	Sex: M F
Address:	Religion:
SERVICE DETAILS Date of Service:	Time:
Type of Service: Full Service Cortege	NSNA Early Delivery
Single Service Double Service	Other:
Chapel:	
Pre-Arranged Property: Yes No Gu	uardian Plan: Yes No
Details (e.g. Site Location, Guardian Information):	
APPLICANT DETAILS	
Title: Given Name:	Surname:
Address:	Postcode:
Phone No: Email:	
COFFIN/CASKET DETAILS	
Coffin Width (incl handles):	Height:
Total Weight Range: 0-120kg (weight of deceased & coffin combined)	20+kg – Specify exact weight:
SPECIAL INSTRUCTIONS	
Witness of Insertion: AV Presentation:	Service on Park Website:
Private Service*: Livestream Service:	Publish Livestream Link on Website:
Special Instructions: (incl religious or cultural requirements)	
We endeavour to cremate a deceased on the day they are received into care, however cremation can occur later in compliance with State Health Regulations. All paperwork should be received into Bookings 24 hours the business day prior to the service. Paperwork should be accurate and consistent, including nameplate. Single Service time is for a 45-minute duration, a late fee may apply if time is exceeded. Family agrees to have service published on our website, including livestream link, unless specified above. *Private Service refers to NO details to be publicised, advertised or disclosed by the Park including on site Chapel notices. Please supply AV guidelines to family.	
FUNERAL DIRECTOR CONFIRMATION I hereby witness and confirm the above details	
Full Name:	
Cinnet was	Date:
Signature:	Phone No: