OUR LADY OF THE MISSION PARISH CRAIGIE



COLUMBARIUM LEAF - APPLICATION	
Section A: Details of Applicant	
Title: Given Name:	Family Name:
Current Address:	
Suburb/Town:	Postcode: State:
Phone:	Mobile:
Email :	
Relationship of applicant to Person Remembered:	
Relationship to Craigie Parish:	
Section B: Details of Person Remember	
Title: Given Name:	Family Name:
	ease circle) position of Leaf allocated by Committee
Section C: Signature and Declaration	
I, hereby acknowledge that I have received a copy	
of the Columbarium General Conditions of Our Lady of the Mission Parish Craigie and that I have read,	
understood and accepted the terms therein.	
Signature	Date://
Office Use Only: Payment Details: Cost \$60 (plus extra cost of engraving)	
Office Use Offig. Payment Details. Cost	\$60 (plus extra cost of engraving)
	surcharge) 3.Direct Debit – BSB 086 006 A/C 66579 4722
Paid By: 1.Cash 2.EFTPOS or Credit Card (1.5%	surcharge) 3.Direct Debit – BSB 086 006 A/C 66579 4722
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Paid By: 1.Cash 2.EFTPOS or Credit Card (1.5% Received BySignat Receipt Number:CM Application Number :C	surcharge) 3.Direct Debit – BSB 086 006 A/C 66579 4722 ureDate/
Paid By: 1.Cash 2.EFTPOS or Credit Card (1.5% Received BySignat Receipt Number:CM Application Number :C Signatures of Approval:	surcharge) 3.Direct Debit – BSB 086 006 A/C 66579 4722 ureDate/