

WEBSTER UNION CEMETERY

ADOPT A GRAVE APPLICATION

A form is to be completed for each grave

Name of Volunteer:

Address:

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Contact No:

Name of person interred:

Date of last interment:

Grave Location: (Sections 1 & 2 only)

Type of Memorial:

Proposed work/Comments

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The Volunteer understands and agrees that the Cemetery shall not be liable for injury to the Volunteer.

Signature of Volunteer:

Date:

Cemetery Official Approval:

Date:

Approval to proceed may only be granted by a Cemetery official upon completion by the official of a review of the grave and the plan of work intended. Cleaning of the monuments or reconstruction work will not be allowed. The grave site must comply with Cemetery Rules & Regulations.