



WESTMINSTER
PRESBYTERIAN CHURCH

3900 West End Ave. Nashville, TN 37205

East Columbarium Application

(an application must be filled out for *each space* requested for reservation)

Name of Applicant: _____

Relationship to Interred: Self

Spouse Partner Child Parent Grandparent Other* _____
*to be approved by Session

Please print the following name clearly and exactly as you wish it to appear on the Columbarium plaque.
(limit to 22 spaces -- letters and spaces between names)

Name of Person to Be Interred: _____

Year of Birth: _____ Year of Death (if applicable): _____

Wall Niche Space
\$2,000

Common Area
\$1,000

The undersigned, _____ (hereinafter called
"Member"), hereby agrees to pay Westminster Presbyterian Church, Nashville,
Tennessee (hereinafter called "WPC"), the sum of \$ _____, for the
privilege of interment as more fully described below. This fee is:

- Paid in full;
- \$ _____ paid now, balance to be paid in installments of
\$ _____ per year, due 20_____ (max of 5 years).

Minimum deposit of \$100.00 is due with this application.

This fee covers the cost of interment in either a niche or in the common area. At the time of the interment, the family also will be responsible for purchasing the urn and plaque at cost from WPC. This cost is in addition to the reservation fee. Call the church office for a current estimated price. WPC shall have sole discretion as to the person whose ashes are interred in the Columbarium. All payments must be made prior to interment.

The privilege granted by this Agreement may not be sold, assigned, or transferred. The privilege herein granted is one of use and no ownership interest or right of tenancy in the space designated shall pass by operation of this Agreement. A copy of the Columbarium Policy is available upon request.

Please contact Jo Ann McFarlin (jmcfarlin@nashvillewpc.org) or Alec Koukol (akoukol@nashvillewpc.org) with any questions.

Signing below states you agree upon the terms and conditions of accessing the rights to the Columbarium at Westminster Presbyterian Church, Nashville, TN.

Name of Applicant (please print): _____

Applicant Signature: _____ Date: ___/___/_____

Mailing Address: _____

Home Phone: (_____) _____ Cell Phone: (_____) _____

Email: _____

(For Internal Use Only)	Amt. Pd: \$ _____	
Received: ___/___/_____	NL Assigned #: _____	Date: ___/___/_____
Approved by: _____	Date: ___/___/_____	
For Westminster Presbyterian Church		Version 2.2, 10-05-2020