

*Application for Reservation of Niche in  
St Paul's Columbarium*

Applicant's Full Name:

.....

Applicant's Date of Birth: .....

Applicant's Address: .....

.....

Applicant's Phone Number: .....

Notation: .....

.....

(Here specify whether interment is to be alongside family members)

I the undersigned have read the conditions that apply to the St Paul's Columbarium and hereby agree to them:

.....

Signature of Applicant

I further nominate .....  
as my next of kin or executor who is aware of my choice of interment and will endeavour to fulfill my wishes.

Next of kin's address

.....

Next of kin's phone number: .....