

## ***Diocese of Worcester***

Offices:

St. John's Cemetery  
260 Cambridge St  
Worcester, MA 01603  
Tel: 508-757-7415  
Fax: 508-753-5244

Notre Dame Cemetery  
162 Webster Street  
Worcester, MA 01603  
Tel: 508-753-7692  
Fax: 508-754-8692

### **INSCRIPTION ORDER FORM**

1. The undersigned, owner, heir or appointed family representative hereby authorizes:

Monument Dealer: \_\_\_\_\_

Address: \_\_\_\_\_

To do the following monumental work on monument/marker in

Section: \_\_\_\_\_ Range No. \_\_\_\_\_ Lot Number: \_\_\_\_\_

Original Owner: \_\_\_\_\_ Who is \_\_\_\_\_ living \_\_\_\_\_ deceased as follows:

\_\_\_\_\_

\_\_\_\_\_

Notes to applicant: Names and dates to be added to a monument: If the person is not deceased verify with the cemetery office that the cemetery has on file that the person has permission for burial (someone other than the owner(s) of lot). For a deceased person: They must be interred in the lot before a date of death can be inscribed. If there is no plan to bury than an inscription will only be allowed if the words "In Memoriam" or "In Memory of" is added to the request.

2. Agrees (a) to hold harmless and indemnify the Cemetery against any and all claims, actions, expense and liability of whatever nature, including personal injury and/or property damage which may result from any act or omission of Monument Dealer or its employee, agent or subcontractor, and (b) to make the cemetery whole for any and all damages and/or corrective expense incurred by reason of Dealer's failure to do the work in compliance with the regulations of the Cemetery and/or to remove rubbish and restore the grounds to at least as good condition as when commenced.

Applicants Name: Printed: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

Relationship to Owner: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Address:** \_\_\_\_\_

Dated: \_\_\_\_\_ Signature of Monument Dealer: \_\_\_\_\_

FOR CEMETERY USE ONLY: Owner Number \_\_\_\_\_ Received: \_\_\_\_\_ Record/Finance ck \_\_\_\_\_

Approved by: \_\_\_\_\_ Date Received as Complete: \_\_\_\_\_

**\*\* Duplicate Copy or scanned and emailed copy to be sent to office upon completion of work.**