

# Fair Oaks Presbyterian Church Memorial Garden Policy

## PURPOSE

• The purpose of the Memorial Garden is to provide a final resting place for interment of cremated ashes. The Memorial Garden will offer a place of serenity and beauty for the entire congregation to use for prayer and meditation.

## ELIGIBILITY

• The session will be responsible for approving the interment of cremated remains in the memorial garden.

## INTERMENT SPECIFICATIONS

- The ashes shall be inserted in the ground within the area of the Memorial Garden.
- The exact location of the ashes to be interred will be determined by the family in consultation with the pastor.
- No container of any kind will be permitted for interment.
- No ashes will be placed without a committal service or prayer led by the pastor of Fair Oaks Presbyterian Church or person approved by the pastor.

• Flowers, decorations, or other similar adornments may not be placed on or near the Memorial Garden.

### **REQUEST FOR INTERMENT**

• Interments will be scheduled by speaking with a Fair Oaks pastor and by completing and submitting the form "Memorial Garden Interment Request" to the church office, along with a suggested donation of \$250 to cover the cost of the bronze nameplate and ongoing care of the Memorial Garden.

• A Certificate of Cremation (provided by the funeral home) is required prior to interment.

- The interment of ashes is permanent and may not be moved or transferred.
- The Memorial Garden Interment Request Form must be completed and signed by the decedent or by the next of kin prior to the interment of cremated remains.

#### **REMEMBRANCE PLAQUE**

• A bronze nameplate with name, birth and death year will be added to the Memorial Garden plaque at or near time of interment. Plaques will be cast bronze and permanently mounted on the designated surface on the wall of the Memorial Garden in chronological order. The Fair Oaks office staff will be responsible for ordering the nameplate and arranging its installation.

#### RECORDS

• A record of each person interred shall become part of the official records of the Church and include the date of interment, the full name of the decedent, and the birth and death years of the decedent.

#### **ADDITIONAL INFORMATION**

• The use of the Memorial Garden, and all terms, conditions, rules and regulations relating thereto, is subject to the determination and control of the Session of Fair Oaks Presbyterian Church. The Session reserves the right without notice to amend and/or repeal such terms, conditions, rules and regulations, and, whether now in effect or hereafter made or established, shall be binding upon each and every person.

• While unlikely, Fair Oaks Presbyterian Church reserves the right to relocate the Memorial Garden to any other location within the property of the Church in the event future events require this move.

#### LIABILITY

• No liability of any kind or character is assumed by the Church for the maintenance or preservation of the ashes of any person interred in the Memorial Garden or any loss or damage to the ashes of such deceased person, nor is any liability of any kind assumed by the Church for any matter or thing relating to the Memorial Garden, its use or subsequent maintenance, except for failure to exercise reasonable care.

# Fair Oaks Presbyterian Church Memorial Garden Interment Request

	pleted for each person being interre	ed in the Memorial Garden.
Date of request:		
	State:	
	Email:	
Please check one of the		
This request is for the di	sposition of my own cremated re	mains after my death.
This request is for the di	sposition of a loved one's cremat	ed remains.
Next of Kin or Primary	Contact Information	
Name:		
Relationship to Deceased: _		
Address:		
City:	State:	Zip Code:
Phone:	Email:	
Memorial Garden Policy for received and read in its enti to Fair Oaks Presbyterian Chu below confirms that I am maki after my death, OR I am the ne of cremated remains. *Memorial Garden Donation inclu- the individual on bronze namepla	* for the reservation of one int r Fair Oaks Presbyterian Church, rety. In consideration of the review urch, I agree to abide by the Memori ing this request for the disposition o ext of kin with the authority to make udes interment of ashes, engraving full ate, and ongoing care of the Memorial G	a copy of which I have and acceptance of my request al Garden Policy. My signature f my own cremated remains this request for the disposition name, birth year and death year of farden.
		(printed name) (printed name)
WITNESS:		(signature) (signature)
	(prin	ted name) (printed name)

# Fair Oaks Presbyterian Church Memorial Garden Plaque **Engraving Order Form**

Deceased Name:

(as it should appear in the engraving)

Year of Birth \_\_\_\_\_\_ Year of Death \_\_\_\_\_\_ (to be completed at time of engraving)

# Fair Oaks Presbyterian Church Memorial Garden **Receipt for Reservation**

Donation paid: \_\_\_\_\_\_ For the reservation of one interment.

Donation received on: \_\_\_\_\_\_

(Date)

by:\_\_\_\_\_

(Church Staff Signature)

(Staff Name and Role)