

## Memorial Request

Please ensure that you have thoroughly read and understood the Memorial Request Terms, Conditions and Process document prior to completing this Memorial Request Application Form.

You can click on the link, [Memorial Request Terms, Conditions and Process](#), download a copy via the City's website, [www.melvillecity.com.au](http://www.melvillecity.com.au), or obtain a copy from the City's Civic Centre at 10 Almondbury Road, Booragoon.

### Applicant's Details

*If you are filling in this form manually, please print all details clearly and legibly.*

Applicant Name:	<input type="text"/>		
Address:	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/> Postcode <input type="text"/>
Address for Invoice:	<input type="text"/>		
	<i>(if same as above, leave blank)</i>		
Suburb	<input type="text"/>	State	<input type="text"/> Postcode <input type="text"/>
Home Phone:	<input type="text"/>	Work Phone:	<input type="text"/>
Mobile Phone:	<input type="text"/>	Email:	<input type="text"/>

### Type of Memorial

Personal/Family

Historical/ Community/ Event

Replacement

### Preferred Location

Location 1	<i>Provide a map or picture if possible</i>

Is there a bench already available at this location?      Yes      No

Location 2	<i>Provide a map or picture if possible</i>

Is there a bench already available at this location?      Yes                  No

**Wording for Plaque**      *Wording should be inoffensive, in simple terms, and to a maximum of 25 words and 4 line*


**Is there a Special Date you'd like the installation to be completed by?**

	<i>The City will try and accommodate this date; however there is no guarantee that it will be able to do so.</i>
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I hereby state that I have read, understood, and agree to the Memorial Request Terms, Conditions and Process, and that all information provided in this Memorial Request Application Form is true and accurate.

Signature: 



      Date: