

Riverside CEMETERY

APPLETON CEMETERY ASSOCIATION



714 N. Owaissa Street

Appleton, WI 54911

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F. 920.733.6653

www.RiversideCemeteryAppleton.com

INDIVIDUAL SERVICE PROFILE

To help you prepare...

This form has been designed to have your important information on file with us and this will be beneficial at the time of your final arrangements. The information will assist us with the documents and final wishes for your service here at Riverside Cemetery. Please take a few moments to complete this form as thoroughly as possible. Thank you.

Arrangements being made for (full name) _____

Address _____

City _____ State ____ Zip _____ Telephone () _____

Social Security Number _____ Birthdate and place _____

Father's Name _____ Mother's Maiden Name _____

Marital Status: _____ Name of Spouse _____

Contact person: _____

_____ () _____

Military Service: Branch _____ Rate/Rank _____

Enlistment Date _____ Discharge Date _____

Service Number _____ Service in War _____

Religious Affiliation and Clergy _____

Funeral Service Preference: Funeral Home ___ Church ___ Graveside Only ___ Other _____

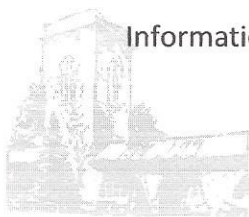
Funeral Home Selection: _____ Attorney _____

Disposition Preference: Burial ___ Entombment ___ Cremation ___ Other _____

Cemetery Location _____ Block/Lot/Grave _____

Marker Preference _____

Information provided by _____ Date _____



A non-profit organization serving our community since 1870