

# THE CARDIFF BOOK OF REMEMBRANCE

## APPLICATION FORM PLEASE PRINT IN BLOCK CAPITALS

### YOUR DETAILS:

FULL NAME.....

ADDRESS.....

.....

..... TELEPHONE.....

PLEASE SPECIFY RED OR BLUE VOLUME.....

(NOTE: The difference between the volumes refers to the colour of ink used for the capital letters.)

ON WHAT DATE WOULD YOU LIKE THE ENTRY TO APPEAR?

.....

### DETAILS OF TEXT

Line 1 is for the Surname & Forename (s) only and must not exceed 25 letters & spaces. The remaining lines may contain a maximum of 30 letters & spaces.

If you are commissioning a design of artwork, floral emblem, badge or gold/coloured capital letter, please note that the cost includes a five-line entry.

LINE 1: .....

LINE 2: .....

LINE 3: .....

LINE 4: .....

LINE 5: .....

LINE 6: .....

LINE 7: .....

LINE 8: .....

LINE 9: .....

PLEASE TURN OVER.....

Please tick box to indicate **ONE** of the following that you would like to be included in the entry:

GOLD CAPITAL LETTER WITH SCROLL WORK  GOLD CAPITAL LETTER WITH ROSES ENTWINED AROUND IT

COLOURED CAPITAL LETTER WITH ROSES ENTWINED AROUND IT Red.....Blue.....

FLORAL EMBLEM  (Please specify type and colour of flower).....

BADGE OR COAT OF ARMS  (Please specify or provide photo/badge for copying)

OTHER ART DESIGN  (e.g. Religious symbols, animals, logos etc – please include an example for the artist to copy)

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### REMEMBRANCE CARD

If you wish to order a Remembrance card, containing an inscribed copy of the entry you have composed for the Book of Remembrance, please state the number of cards required

If you have chosen a Gold/Coloured Capital letter or have commissioned a work of art do you wish to include this in the card? Yes  No

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### REMITTANCE & AUTHORISATION

I have referred to the enclosed scale of charges, and enclose a cheque/postal order (made payable to **CARDIFF COUNTY COUNCIL**) FOR £.....

**PLEASE SIGN HERE**.....**DATE**.....

*N.B. The authority reserves the right to vary any inscription, or to refuse any entry which is deemed to be unsuitable.*

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### OFFICE USE ONLY

RECEIPT NUMBER.....REFERENCE NUMBER.....

OTHER DETAILS.....

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CARDIFF COUNCIL  
BEREAVEMENT SERVICES DIVISION  
THORNHILL ROAD, RHIWBINA,  
CARDIFF. CF14 9UA  
TEL 029 20 544820 FAX 029 20544848

CYNGOR CAERDYDD  
ADRAN GWASANAETHAU PROFEDIGAETH  
THORNHILL ROAD, RHIWBEINA,  
CAERDYDD. CF14 9UA  
FFON 029 20 544820 FFACS 029 20544848

## BOOK OF REMEMBRANCE Applicable from 1st April 2022 - 31<sup>st</sup> March 2023

**Each Individual line is £25.00**

The minimum number of lines required for an entry in the book is **two**

**Artwork, Floral Emblem or Badge £215.00**

This includes a **five-line** inscription

**Coloured Decorated Capital £215.00**

This includes a **five-line** inscription

**Gold Leaf Decorated Capital £225.00**

This includes a **five-line** inscription

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### REMEMBRANCE CARDS

**Applicable from 1st April 2022 - 31<sup>st</sup> March 2023**

**Each Individual line is £10.00**

The minimum number of lines required per card is **two**

**Artwork, Floral Emblem or Badge £140.00**

This includes a **five-line** inscription

**Coloured Decorated Capital £140.00**

This includes a **five-line** inscription

**Gold Leaf Decorated Capital £150.00**

This includes a **five-line** inscription

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Each Volume of the Book of Remembrance contains three months. Once an entry has been made it will always remain in the Book.

**Time scale for entries: -**

For an entry in the January/February/March volume the application must be received by 15<sup>th</sup> October

For an entry in the April/May/June volume the application must be received by 15<sup>th</sup> February

For an entry in the July/August/September volume the application must be received by 15<sup>th</sup> May

For an entry in the October/November/December volume the application must be received by 15<sup>th</sup> August

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