

**RELIGIOUS SOCIETY OF FRIENDS  
JORDANS QUAKER BURIAL GROUND**

This form should be completed as soon as it is decided that a burial at Jordans is required. It should be completed in duplicate, one copy to be returned to Janet May-Bowles, 21 Edinburgh Gardens, Windsor SL4 2AN. Email: JGB1@talktalk.net.

**Particulars of the Deceased**

Full name of the deceased: \_\_\_\_\_

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

Postcode: \_\_\_\_\_

Date of Death: \_\_\_\_/\_\_\_\_/\_\_\_\_

Member: \*Yes/No

Attender: \*Yes/No

Non-Member: \*Yes/No

If Member or Attender:

Area Meeting: \_\_\_\_\_

Local Meeting: \_\_\_\_\_

Name of person making arrangement: \_\_\_\_\_

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

Postcode: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

\*delete as appropriate

**Arrangements**

Date preferred for interment or scattering: \_\_\_\_\_

Acceptable alternative dates: \_\_\_\_\_

Interment:

Coffin: \*Yes/No      Ashes: \*Yes/No      Scattering of ashes: \*Yes/No

Name of Funeral Director: \_\_\_\_\_

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

Postcode: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Email: \_\_\_\_\_

Is a Meeting for Worship required? \*Yes/No

It will be under the care of Elders from: \_\_\_\_\_ Meeting and Jordans  
Meeting

Is a headstone required? \*Yes/No

If yes, details should be set out on Headstone form (JBG3).

\*Delete as appropriate

Signed:

Date: