



WILLASTON CEMETERY
TOWN OF GAWLER
43 High Street Gawler (PO Box 130, Gawler SA 5118)
PH: 8522 9211

The Curator,

Please arrange for the placement of the Ashes of

Address.....

Aged.....Date of Death.....

Place of Death.....

General Section ☐

Lawn Section ☐

Family wish to be present Yes ☐ No ☐

If Yes Telephone No.....

Contact Name.....

Allotment No.....Letter (Row).....Block.....

Other Details.....

Name and Address of Leaseholder or Next of Kin

.....(Postcode).....

Lease No..... Expiry Date:.....

Send Account to.....

Address

Signature

(For Office Use Only)

Lease No.....	\$
Burial No.....	\$
Saturday Burial (Extra).....	\$
Other.....	\$ _____
	\$ _____

Account No.....

Receipt No..... Ashes placed/...../.....