



SAINT NICHOLAS
Catholic Church

ST. NICHOLAS CEMETERY ASSOCIATION

Cemetery Sexton: Terry VanHoof 920-378-4492

INSCRIPTION WORKSHEET FOR A DOUBLE NICHE – TWO PEOPLE

PLEASE USE ALL CAPITAL LETTERS & INDICATE SPACES IN NAMES

LAST NAME: _____

UPPER: FIRST NAME & MIDDLE INITIAL _____

BIRTH MONTH & DAY _____ DEATH MONTH & DAY _____

BIRTH YEAR _____ DEATH YEAR _____

LAST NAME: _____

LOWER: FIRST NAME & MIDDLE INITIAL _____

BIRTH MONTH & DAY _____ DEATH MONTH & DAY _____

BIRTH YEAR _____ DEATH YEAR _____

PLEASE CHECK YOUR CHOICE OF STYLE 1 OR STYLE 2:

_____ **STYLE 1**

_____ **STYLE 2**

	SMITH	
	JOHN A.	
DOB	+	DOD
	LORI M.	
DOB	+	DOD

	SMITH	
	JOHN A.	
DOB	+	DOD
	SMITH	
	LORI M.	
DOB	+	DOD

THE ABOVE IS CORRECT AND THE WAY WE WISH TO HAVE THE DOOR
INSCRIBED ON OUR COLUMBARIUM NICHE.

SIGNATURE

DATE

SIGNATURE

DATE

OFFICE USE ONLY:
NICHE LOCATION: _____

NICHE LOCATION: _____