



Christ Chapel Memorial Garden
800 West College Avenue
St. Peter, MN 56082

INURNMENT AGREEMENT

PURCHASER #1

(Name)

(Address)

(City)

(State)

(Zip)

(Phone)

(e-mail)

PURCHASER #2

(Name)

(Address)

(City)

(State)

(Zip)

(Phone)

(e-mail)

INURNMENT SITE

Inurnment in the Christ Chapel Memorial Garden Niche Number _____

Inurnment Agreement

DESIGNATED PERSON(S)

The Ashes of the following Designated Person(s) may be Inurned in the site

<u>First and Last Name</u>	<u>Eligibility Criteria and Detail</u>
<hr/>	<hr/>
<hr/>	<hr/>

ELIGIBILITY

Inurnment in the Christ Chapel Memorial Garden is limited to Eligible Persons, as defined in the Policies and Procedures adopted by the College.

1. Current/former Gustavus Adolphus College Student (list graduation year)
2. Family member of current/former student (list relationship to the current/former student)
3. Current/former Gustavus Adolphus College Employee (list years of employment)
4. Family member of current/former employee (list relationship to current/former employee)

Purchaser named above hereby purchases the right to use the Inurnment Site designated in the Gustavus Adolphus College Memorial Garden for the sole purpose of Inurnment of the Ashes of the Designated Person(s). The Inurnment Site is reserved with the payment of \$2,000 per Designated Person, receipt of which payment is hereby acknowledged. The Purchaser acknowledges by his or her signature below that this Agreement is subject to the Policies and Procedures of the Christ Chapel Memorial Garden, incorporated into this Agreement by reference, receipt of which is hereby acknowledged.

This Agreement is executed by the Purchaser on the _____ day of _____, 20____, and will become effective when accepted by the College.

(Signature of Purchaser #1)

(Signature of Purchaser #2)

Payment of \$ _____ was received.

An additional gift of \$ _____ was received for the Christ Chapel Memorial Garden Fund to be used for on-going maintenance of the Memorial Garden and the Christ Chapel facility.

Accepted by the College on the ____ day of _____, 20____, subject to the terms and condition set forth on the back and the Policies and Procedures of the Christ Chapel Memorial Garden, incorporated by reference.

By: _____

Title: _____

Inurnment Agreement

EXECUTOR

At the time of the inurnment, an Executor will work with the Chaplains Office to coordinate the details of the inurnment, inscription, and committal service. Please list who has authority to execute these details on behalf of the Purchaser if needed.

Name	Relationship to Designated Person	Email/Phone
1. _____		
2. _____		
3. _____		
4. _____		