



CEMETERY INFORMATION FORM

Please fill in the form below and return to the church office:

Pendleton United Methodist Church
Post Office Box 646
Pendleton, SC 29670

Name of person to be buried: _____

Date and place of birth: _____

Date and place of death: _____ Date of Burial: _____

Family of deceased with addresses if known:

Mother: _____ Address: _____

Father: _____ Address: _____

Spouse: _____ Address: _____

Sister: _____ Address: _____

Brother: _____ Address: _____

Children: _____ Address: _____

_____ Address: _____

_____ Address: _____

(Use the back if additional space is needed.)

Name and address of person still affiliated with Pendleton United Methodist Church, or person living to be contacted in the future concerning the cemetery:

Name: _____ Address: _____

Office Use:

Plot No. or location _____