

Co-operative Funeralcare

Full Name of Deceased:

Location: Cemetery/Church/Crem:

Time of Service / Burial: Time of dove release (if different):

NB: We allow a 45 min extension for lateness after your stated release time before leaving, should our attending handler have another release following this one.

Date of funeral: (please X box) Burial Cremation

Cremation - Committal Only: (please X box) Yes No

Burial - Direct to Grave: (please X box) Yes No Release before or after the backfill: (please X box)
Before After

How Many Doves: (please X box) Single Pair No. of additional doves

Total number of doves (if applicable)

Name of person(s)/family who have booked doves:

Special Requirements: (i.e. young children to release, all by hand, by flock, messages on doves, as coffin is lowered etc...)

Co-operative Funeralcare Branch:

Contact name:

Date of Booking: Your Telephone No:

Your Fax No: E-mail:

This section to be completed by TWDC and confirmed back for your confirmation

Price: £

Confirmation of booking: Fax: E-mail

Date: Signed: