CITY OF YORK COUNCIL

Book of Remembrance

Please complete this application form in BLOCK CAPITALS.
Check details carefully as mistakes cannot be rectified afterwards.

Applicant's Name		Address	
Telephone			
Email		Postcode	
Signed		Date	

DATE FOR ENTRY

NAME ONLY SURNAME FIRST

MAXIMUM 40 CHARACTERS INCLUDING SPACES, OR 34 WHERE A MOTIF IS ORDERED.

MAXIMUM 27 CHARACTERS, OR 22 WITH A MOTIF

Line 1

Line 2

Line 3

Line 4

Line 5

Line 6

Line 7

Line 8

MOTIF

Please note: City of York Council reserves the right to vary any inscription as may be found necessary or to refuse an entry which is considered unsuitable. Cheques/postal orders should be made payable to City of York Council.