SEA CLIFF MEMORIAL COMMITTEE
300 Sea Cliff Avenue
P.O. Box 340
Sea Cliff, NY 11579
T. 516-671-0080 Fax. 516-671-6508

APPLICATION FOR A MEMORIAL

'To live in hearts we leave behind is not to die."

Date: _____

Name of Applicant/Sponsor: _____

Organization, if any: _____

Address: _____

_____

Phone(s): _____ E-Mail: _____

Sea Cliff Resident whose memory you would like to honor:

_____

Choose a preferred location.* Choices are subject to the availability of memorial sites.

Choice No. 1: _____

Choice No. 2: _____

*Recommendations may be made if your location choices are unavailable.

Submit Application to Sea Cliff Memorial Committee at Sea Cliff Village Hall.