

**HEBREW CEMETERY ASSOCIATION**

*Established 1867*

**PRICE LIST AND QUOTATION**

FUNERAL OF \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ DATE OF DEATH \_\_\_\_\_ FAMILY MEMBER \_\_\_\_\_  
 RELATION \_\_\_\_\_ PHONE # \_\_\_\_\_ EMAIL \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 TEMPLE/RABBI \_\_\_\_\_ PHONE # \_\_\_\_\_ FUNERAL HOME \_\_\_\_\_ FUNERAL DIRECTOR \_\_\_\_\_

**- GRAVE SITES -**

<b>SECTION</b>	<b>LOCATION</b>	<b>TYPE OF MARKER ALLOWED</b>	<b>PRICE PER GRAVE</b>
Section I – Historic <input type="checkbox"/>	Near Historic Chapel	Headstone, Footstone, Ledger	\$2,500.00
Section II, III(family), V, VI, VII <input type="checkbox"/>	Near Circle & to Mem. Building	Headstone, Footstone, Ledger	1,800.00
Section III (clustered) <input type="checkbox"/>	Near Brick Sitting Wall	Ground level plaque ONLY	1,800.00
Section IV (cremation) <input type="checkbox"/>	Near Brick Sitting Wall	Ground level plaque ONLY	575.00

= Headstone Monument(Optional)       = Ground Level Plaque(Restricted)

<b>GRAVE RESERVATION/INTERMENT</b>	<b>SECTION</b>	<b>PLOT</b>	<b>GRAVE</b>	<b>PRICE</b>
<b>NAME:</b> _____	_____	_____	_____	_____
<b>NAME:</b> _____	_____	_____	_____	_____
<b>NAME:</b> _____	_____	_____	_____	_____
<b>NAME:</b> _____	_____	_____	_____	_____
<b>NAME:</b> _____	_____	_____	_____	_____
<b>NAME:</b> _____	_____	_____	_____	_____
<b>GRAVE SITE TOTAL*</b>				_____*

**- CEMETERY SERVICE FEES -**

<b>PERPETUAL GRAVE CARE</b> – CREMATION SECTION-\$475.00/\$950.00	\$975.00	_____
<b>BURIAL</b> – bodily remains (INCLUDES OPENING, CLOSING, LINER, SHROUD, & UNVEILING)	2,175.00	_____
<b>BURIAL</b> – cremation (INCLUDES OPENING, CLOSING & UNVEILING)	575.00	_____
<b>BURIAL</b> – stillborn/infant (includes grave & all cemetery services & fees)	350.00	_____
<b>SERVICE FEE TOTAL**</b>		_____**

**MEMBERSHIP** – (\$72.00 annually - must be paid in full for 24 months to receive membership prices)

**TOTAL QUOTATION**

Harry & Bryant Company & JB Tallent (Preferred Service Providers) may collect their customers Hebrew Cemetery Association fees on behalf of the Association; **otherwise, all cemetery charges& graves must be paid in full prior to interment.**

**NEW MEMBER-NAME** \_\_\_\_\_ **PHONE** \_\_\_\_\_ **E-MAIL** \_\_\_\_\_  
**ADDRESS** \_\_\_\_\_ **CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**- PAYMENT OPTIONS -**

\* **Grave Sites** may be paid no later than— \_\_\_\_\_  
*(\*Grave Sites- minimum payment terms: eight quarterly payments of total, paid over 24 months from time of purchase.)*

\*\* **Service fees** may be paid no later than— \_\_\_\_\_

We (I) hereby acknowledge and understand by signing this quotation that the prices included in this quotation are only binding on the Association up to 15 days after the date signed by me, and that the Grave Sites are not reserved for me until a signed paid Purchase Agreement is Executed by me. I acknowledge that a blank copy of a Purchase Agreement was provided for my review.

Signature of Family Member: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Cemetery Representative: \_\_\_\_\_ Date: \_\_\_\_\_

<b>DIRECTOR</b>	Sandra Goldman	Home: 704-366-7590	Mobile: 704-576-1859
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