

CREMATORY OPERATORS CERTIFICATION REGISTRATION

DATE DESIRED: _____

7-DAY NOTICE REQUIRED - CLASS WILL BE HELD AT:

GRACELAND & FAIRLAWN FUNERAL HOME & CEMETERIES ♦ 2091 N OAKLAND AVENUE ♦ DECATUR IL 62526-3700
LOCATION PHONE: 217-429-5439 ♦ REGISTRATION PHONE: 866-758-7731

TO BE HELD FROM 9:30 A.M. - 2:30 P.M.

LUNCH IS NOT PROVIDED. PLEASE BRING A BAGGED LUNCH.

5 CREDIT HOURS WILL BE GIVEN TO QUALIFIED PERSONS

CREMATION CERTIFICATION REGISTRATION FORM (PLEASE PRINT WITH BLOCK LETTERING)

CREMATORY: _____

MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____ FAX: _____

E-MAIL: _____

Is Crematory a:

Free standing Business _____, Combination w/ Funeral Home _____
Or Combination w/Cemetery _____

REGISTRANT #1 - NAME: _____

HOME ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____ E-MAIL: _____

FD LICENSE # _____ FOR CREDIT HOURS

REGISTRANT #2 - NAME: _____

HOME ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____ E-MAIL: _____

FD LICENSE # _____ FOR CREDIT HOURS

_____ **\$350.00 MEMBERS**

(COURSE IS \$276.00 AND INCLUDES MEMBERSHIP FEE OF -
\$74.00 FOR ADD'L REP - EACH PERSON TAKING THE COURSE
MUST BE A LISTED REPRESENTATIVE OF THE CEMETERY/
CREMATORY/FH MEMBER OR THE NON-MEMBER FEE OF \$875.00
APPLIES)

_____ **\$875.00 - NON MEMBERS**

TOTAL ENCLOSED \$ _____

NOTE: CERTIFICATE RE-ISSUANCE
OR CERTIFICATE DUPLICATION FEE **\$35.00**

ALL CLASSES REQUIRE PRE-REGISTRATION AND PRE-PAYMENT. **VISA/MASTERCARD ACCEPTED FOR PAYMENT**