

# Burial Right Purchase Agreement

Please make check out to: Natural Path Sanctuary



## Purchaser Information:

Name: \_\_\_\_\_ e-mail \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone \_\_\_\_\_

Burial Right purchased for the following person: \_\_\_\_\_

As a Legacy level donor to the Linda & Gene Farley Center for Peace, Justice and Sustainability, I have chosen to exercise my right to purchase a burial right in the Natural Path Sanctuary, a natural burial ground located at the Farley Center. I further understand that the current price of the burial right in the year 2024 is below, and I choose:

- ☐ Full body burial: \$1,500 (Includes burial lot, opening and closing of the grave, maintenance of records, and other services. Casket burials and weekend burials will incur an additional fee at time of burial.)
- ☐ Cremains burial or scattering: \$1,000 (Includes same services as full body burial plus investment in carbon offsets.)

The Burial Right Holder shall have the right to use said space for burial **only when the total payment has been received** and arrangements are made with the Natural Path Sanctuary coordinator for the date and time of burial, unless written permission to do otherwise is granted by the NPS coordinator.

- ☐ Full payment received in the amount of: \$ \_\_\_\_\_ OR
- ☐ Payment plan arrangement: (10 monthly payments of \$150 or \$100) Amount Received: \$ \_\_\_\_\_

NOTICE TO PURCHASER: (1) Do not sign this form before you read it or if it contains any applicable blank spaces. (2) You are entitled to an exact copy of the purchase agreement form you sign. The Purchaser further acknowledges that he or she has carefully read and fully understands the terms of this agreement, and that he or she hereby acknowledges receipt of an exact copy of this form.

**I agree to abide by the attached Conditions of Agreement and the Rules and Regulations of Natural Path Sanctuary.**

\_\_\_\_\_  
**Purchaser Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Natural Path Sanctuary Representative**

\_\_\_\_\_  
**Date**

.....  
**ASSIGNED BURIAL RIGHT LOCATION - FOR OFFICE USE ONLY**

- |    |  |                             |
|----|--|-----------------------------|
| A. | Block _____ Lot _____ for full body burial | Orientation of lot: N/S E/W |
| B. | Block _____ Lot _____ for cremains burial  | Orientation of lot: N/S E/W |
| C. | Section _____ for scattering of cremains   |                             |