

SCCFA MEMBERSHIP APPLICATION FORM

Completely fill out this form (PLEASE PRINT CLEARLY), sign and date it, and mail to:
SCCFA, 9500 Christo Court Ct., Mobile, AL 36695 Phone: (251) 634-3434 – Fax: (251) 634-3435

The undersigned hereby applies for membership to the Southern Cemetery, Cremation & Funeral Association according to the categories designated below. Upon election, the undersigned agrees to the following: To abide by the Code of Ethics, Constitution and By-laws. Understanding that false information given on this application will be considered cause for forfeiture of membership: To give complete and accurate answers to the best of my (our) ability.

Individual's Name _____

Title: _____

Parent Company (if Corporate Member) _____

SPONSOR (Current SCCFA Member, if applicable):

Sponsor Name _____

Funeral Home/Cemetery/Company _____

Cemeterians Check items available in your cemetery.

- | | |
|--|---|
| <input type="checkbox"/> Lots | <input type="checkbox"/> Lawn Crypts |
| <input type="checkbox"/> Garden Crypts | <input type="checkbox"/> Columbarium |
| <input type="checkbox"/> Crematorium | <input type="checkbox"/> Community Mausoleum |
| <input type="checkbox"/> Funeral Home | <input type="checkbox"/> Individual Mausoleum |
| <input type="checkbox"/> Bronze | <input type="checkbox"/> Monuments |

Funeral Directors Check items available in your funeral home.

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Caskets | <input type="checkbox"/> Cemetery Lots |
| <input type="checkbox"/> Vaults | <input type="checkbox"/> Crematorium |
| <input type="checkbox"/> Clothing | <input type="checkbox"/> Memorials/Monuments |
| <input type="checkbox"/> Urns | <input type="checkbox"/> Open/Closing Services |
| <input type="checkbox"/> Flowers | <input type="checkbox"/> Mortuary |
| <input type="checkbox"/> Other: _____ | |

Non Cemeterians/Funeral Directors

List type of business & principle product(s) or services:

Method of Payment Check Only (Effective 11/2000)

Please make payable to Southern Cemetery, Cremation & Funeral Association, enclose with this completed form and mail to:

SCCFA, 9500 Christo Ct., Mobile, AL 36695

Print Name _____

Signature _____

Categories of Membership Applied For:

Check One Only*. Call the SCCFA for questions concerning categories and membership category descriptions.

- Active \$260.00
- Small Active (150 burials & under)..... \$130.00
- Active Corporate or Multi-Ownership
 The first cemetery/funeral home \$260.00
 For additional cemeteries/funeral homes ... \$130.00 each
- Associate..... \$130.00
- Supplier..... \$260.00
- Professional \$260.00
- Associate Supplier & Professional..... \$130.00
- Affiliate..... \$130.00
- Allied Industries..... \$130.00
- SPECIAL RATE - First Year Membership \$99.00

* (If paying special 1st year rate, please also check the appropriate membership category box for future billings)

Funeral Home/Cemetery/Company Name _____

Address _____

City/State/Zip _____

Phone _____ Fax _____

Email _____

SCCFA REGION

Alabama **Arkansas** **Delaware** **Florida** **Georgia** **Kentucky** **Louisiana** **Maryland**
Mississippi **North Carolina** **Oklahoma** **South Carolina** **Tennessee** **Texas** **Virginia** **West Virginia**

Application for membership in the Southern Cemetery, Cremation & Funeral Association may be submitted to any member of the SCCFA, who will forward the same to the appropriate person for processing. All applications are subject to approval by the Board of Directors. A check in the amount of the first year's dues must accompany the application. If the applicant is not accepted for membership, the check will be refunded in full.