



**CONSECRATION FORM**

Please download this editable form and email to [admin@caulfieldshule.com.au](mailto:admin@caulfieldshule.com.au)

Dear Mourner,

We take this opportunity to wish you a long life and hope that you be spared from any further grief and sorrow.  
*Hamakom Yenachem Etchem*

**ABOUT YOU**

First Name \_\_\_\_\_ Surname \_\_\_\_\_

Mobile Number \_\_\_\_\_ Home Number \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Suburb \_\_\_\_\_ Postcode \_\_\_\_\_

**DETAILS OF DECEASED AND CONSECRATION ARRANGEMENTS**

First Name \_\_\_\_\_ Surname \_\_\_\_\_

Hebrew Name \_\_\_\_\_ Father's Hebrew Name \_\_\_\_\_  
 ben / bat

Date of death \_\_\_\_\_ Officiating Rabbi \_\_\_\_\_ Consecration Date \_\_\_\_\_ Time \_\_\_\_\_

Cemetery Details

Plot No. \_\_\_\_\_ Directions from shtiebel \_\_\_\_\_

Short description of the deceased and what is to be mentioned at the consecration:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Any other speakers:

\_\_\_\_\_

\_\_\_\_\_

**ACCOUNT**

No fee applies when a parent, grandparent or child of the deceased is a financial member of the CHC In other cases, please send the account to (refer to current price list for fee):

First Name \_\_\_\_\_ Surname \_\_\_\_\_

Mobile Number \_\_\_\_\_ Home Number \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Suburb \_\_\_\_\_ Postcode \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_