



CREMATION URN PERSONALIZATION ORDER FORM

FAX: 1.800.914.1141

EMAIL: orders@eckelsandcompany.com

Questions? Please call: 1.800.265.8350

Firm Name: _____

Contact Name: _____

Billing Address: _____

Telephone: _____

Shipping Address: _____

Fax: _____

Email: _____

PO# / RE: _____

Name of Urn: _____

Urn Product #: _____

Font Style: **Jonathan** ☐ *Barber* ☐ **Williams** ☐ **MATTHEWS** ☐
(default font is Williams)

Location of Engraving: ☐ Front ☐ Top
(select one)

Name to be engraved: _____

Dates to be engraved: (By default, dates are engraved on two lines) ☐ DATES ON ONE LINE

Date Line 1: _____

Date Line 2: _____

Custom Text: _____

Standard Image to be engraved: IC Location: _____

Standard Image to be engraved: IC Location: _____

Custom Image to be engraved: _____

(please send all custom images as a high res JPEG to orders@eckelsandcompany.com unless otherwise instructed)

Other Notes: _____

Proof Sent Via:

☐ Email

(note: no proofs sent for orders without engraving)

☐ Fax

NEEDED BY

Date: _____
(end of day, by date requested above is the default)

Select special time if applicable:

☐

9 am

☐

10:30 am

☐

Saturday

(Call to see what specialty services are available in your location, additional charges may apply.)