

WISHES FORM

When the time comes the
person below wishes for their
horse/pony to be lovingly
looked after by **Cherry Tree Pet**
Crematorium

Date Completed: / /

Owners Full Name:

Owners Address:

Post Code:

Contact Number:

Collection/Yard Address:

Post Code:

Yard Contact Number:

Pet Name:

Hand Size:

Breed:

Colour:

Vet Practice Name:

**I Would Like Individual Cremation
With Ashes Home in a:**

Wooden Casket

Wicker Scatter Basket

Scatter ashes at Cherry Tree.

Other:

Please Specify

(Which Urn you would your pet returned home in)

Yard Acces:

Are we likely to need any specialist vehicles to access the yard (4x4).

Before Cremation Please Take a:

Main Cutting:

Tail Cutting:

Shoes Returned:

Other:

Please Specify

Signed:

Print Name:

Date: / /

By signing this form, I authorise my appointed representative and/or veterinary practice to act on these instructions, and I authorise Cherry Tree Pet Crematorium to carry out my pet's individual cremation in accordance with this form.



Cherry Tree Contact Info:

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