

**HILDA METHODIST CEMETERY ASSOCIATION  
APPLICATION**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

Daytime phone #: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Number of plots to be purchased:  
(\$600 per plot) \_\_\_\_\_

Name of direct descendant: \_\_\_\_\_

Relationship to descendant: \_\_\_\_\_

Past or Present Member of Hilda Methodist Church? \_\_\_\_\_

\*No plot can be sold, transferred, or gifted to anyone unless as stipulated in the Bylaws.

\*The condition of plots at all times shall conform to Bylaws.

In 50 words or less, please explain what the Hilda Cemetery means to you and why you wish to be buried in this cemetery.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please return to: Teresa Walker, Sales Officer  
Hilda Methodist Cemetery Association c/o Hilda United Methodist Church  
P.O. Box 1404  
Mason, TX 76856

Date Received: \_\_\_\_\_

Approved by: \_\_\_\_\_

Fee Paid: \_\_\_\_\_

Lot/Plot#: \_\_\_\_\_