

REST HAVEN MEMORIAL PARK

Promises Kept

1200 Sagamore Parkway North | Lafayette, IN 47904 | (765) 447-1797 | www.resthavenlafayette.com | 

2025 Floral Order Form

For: _____
Name

For: _____
Name

For: _____
Name

For: _____
Name

PLEASE NOTE: The Floral Program is for bronze or granite vases already attached to markers or monuments, or for mausoleum crypts. You can select one, two or three seasonal bouquets to be placed on the first month of the season. Or if instead of a season you select a special occasion date, you can select which bouquet you would like for that special occasion. Mark your selection below, to be placed as long as the special occasion dates fall between March 15 and November 1. Winter decoration order forms will be mailed in October.

STEP 1:
Place a checkmark next to Placement Time. Select either the Season or write in a Special Occasion Date.

Flowers are placed during the first month of the season. Special Occasion bouquets will be placed up to 15 days prior to date.

SPRING

March, April, May
 or Special Occasion
Date: _____

Bouquet # ____
 Mausoleum # ____

SUMMER

June, July, August
 or Special Occasion
Date: _____

Bouquet # ____
 Mausoleum # ____

FALL

Sept., Oct., Nov.
 or Special Occasion
Date: _____

Bouquet # ____
 Mausoleum # ____

STEP 2:
Place a checkmark next to Bouquet # or Mausoleum # for each Placement Time in Step 1.

Above, write in the Bouquet # or Mausoleum #. For example: Bouquet #2, or Mausoleum #9 from the selection to the right.

GROUND BURIAL SELECTION



Yellow Tulips and Purple Iris



Pink w/ White Orchid Mix



Purple Violet Yellow Wildflower Mix



Blue Tulips & Yellow Orchid Mix



Red, Purple & Yellow Orchid Mix



Blue Anemone Garden Mix Bouquet



Auburn Sunflower & Pumpkin Mix



Red Roses AVAILABLE in May

Mausoleum Selection

Mausoleum #9

Yellow Cabbage Rose

Mausoleum #10

Burgundy Roses Peach Mums

STEP 3:
Select Fee for Number of Placements Selected.

ORDER SUMMARY & PURCHASER INFORMATION

1 Placement
\$40

2 Placements
\$80

3 Placements
\$120

Your Name (Please Print) _____

Address _____

Phone _____

Email Address _____

METHOD OF PAYMENT

Check Enclosed OR Money Order Enclosed (Check One)
Please make payable to cemetery listed above.

VISA
 MasterCard
 Discover
 American Express

Order Total: \$ _____
All Sales Tax Included

Credit Card Number: _____

Expiration Date: _____

Signature: _____

3 digit security code on back of card _____

Spring clean-up starts March 1 through March 15. Fall clean-up starts November 1 through November 15. Cemetery/ Funeral Home is not responsible for lost or missing flowers once placed in vase.

OFFICE USE ONLY

GARDEN: _____ LOT: _____ SPACE: _____ BLDG: _____ FLOOR: _____
CORRIDOR: _____ CRYPT: _____