

West Virginia Cemetery & Funeral Association, Inc.

Date: _____

NOTE: INCOMPLETE APPLICATIONS WILL BE RETURNED WITHOUT ACTION

PART I of 2

Company Name: _____

Mailing address (city / state / zip): _____

Phone: () _____ Fax: () _____ Email: _____

Individual's Name: _____

Name of Parent Company (if Corporate Member): _____

Remittance in the amount of \$ _____ is hereto attached, to be credited for first year's dues if admitted, or refunded in full if rejected.

I hereby certify that the cemetery or funeral home requesting membership is being operated in compliance with all of the statutory laws and ordinances of West Virginia and our local community as they apply to our operations.

Signature and Title of Executive Officer of Applicant

Type of Membership Applied For: ___ Cemetery ___ Funeral Home ___ Supplier ___ Associate

A. TYPE OF MEMBERSHIP (one per application)

Active Member (\$150): Any person, firm, association or private corporation owning, operating or engaged in the development, construction or management of a cemetery, funeral home, mausoleum or columbarium, whose place of business is located within the state of West Virginia. Active membership is also opened to any person, firm, association or corporation engaged in an allied industry. Allied industries are defined as those persons, firms, associations or corporations engaged in providing retail services or products relating to dead human remains including but not limited to funeral directors, cremationists, retail monument dealers and florists.

Additional Cemeteries or Funeral Homes in Corporations (\$100).

Supplier Membership (\$125): Shall be available to personnel of cemetery, funeral and allied industry supply organizations or cemetery development organizations or sales organizations located in West Virginia or elsewhere. Such members shall have no voting rights and may not hold office.

Associate Membership (\$50): Shall be available to additional personnel of organizations, cemeteries and funeral directors holding one active or supplier membership. Such member shall have no voting rights and may not hold office.

B. Legislative and Consumer Protection Committee Assessment

Assessment per burial or call for the Legislative and Consumer Protection Committee per year

(\$4.00 per burial or call) *First year applications will not be assessed this fee. Fee begins 2nd full year of membership.

Phone: 304-752-7225 Fax: 304-752-8296

Return application to:
West Virginia Cemetery & Funeral Association, Inc.,
P.O. Box 310, Pecks Mill, West Virginia, 25547-0310

West Virginia Cemetery & Funeral Association, Inc.

PART II

Company Name: _____ Phone: _____

Mailing address (city / state / zip): _____

Physical Location _____

Do you maintain a Mortuary in connection with your cemetery? Yes No

Date cemetery commenced business? _____ Number of internments or calls to date? _____

Is cemetery incorporated? Yes No

Does cemetery operate as Non-Profit or For Profit? Yes No

Is cemetery a Church Municipal Memorial Park Traditional or Other _____

Total acreage of cemetery? _____

Number of acres now developed so that burials can be made therein _____?

Type of memorialization: Flush Upright Both

Do you have community or garden mausoleum? Yes No Other _____

If so, what is the number of crypts? _____ Niches? _____

Do you have a Pre-need sales program?

Lots Vaults Bronze Monuments Mausoleums Lawn Crypts

Opening and Closing of Grave

Do you have perpetual care trust fund? Yes No

As of the most recent audit of the endowment care fund, does it meet the state requirements of a minimum of \$10,000 or more?

Date of last audit? _____

Name of the "Perpetual Care Trust Fund" holding institution and address:

Name of company, corporation officer, whom we can contact: _____

Contact information: _____ Phone _____

Have any of the principals been convicted of a felony?

Explain: _____

I hereby certify that each of the foregoing statements are true:

Print Name

Signature

PURPOSE OF WVCFA

The purpose of the Association is to motivate its members to strive for excellence in service to families and communities in which they serve. To encourage each member's compliance with State and Local statutes and sound business principles. To provide structured learning sessions for its members and their staff in all areas of cemetery and funeral management. To endeavor in every way possible to resolve consumer problems with any of its members and promote harmony with all cemeteries, funeral homes and the communities they serve.

MEMBERSHIP BYLAWS

Any cemetery located in West Virginia ("Active"), as well as its officers and employees ("Associate") shall be eligible for membership in the Association. Each cemetery shall be allowed one vote only. It is the responsibility of the cemetery to designate its representative and notify the WVCFA of any changes. Persons or firms supplying materials or services to cemeteries shall be admitted to membership on payment of dues, and shall not be entitled to vote on questions coming before its meetings and in the election of officers.

REQUIREMENTS

All petitions for membership shall be endorsed by 2 sponsoring members of the Association, in good standing, to the Secretary/Treasurer. The Secretary/Treasurer will then notify the board of directors of receipt of application. If accepted the Secretary/Treasurer will notify the applicant that they are admitted into membership of the West Virginia Cemetery & Funeral Association.