

BRIGADIER GENERAL WILLIAM C. DOYLE VETERANS MEMORIAL CEMETERY
PRE-REGISTRATION FORM

(ALL INFORMATION COVERED BY PRIVACY ACT)

THE RULES AND REGULATIONS OF THIS STATE VETERANS CEMETERY STATE THAT THE VETERAN MUST BE HONORABLY DISCHARGED.

PRE-REG. NO.

VETERANS INFORMATION

VETERANS NAME: LAST, FIRST, MI		DATE OF BIRTH	PHONE NUMBER
			ADDRESS
VET AKA/MAIDEN NAME:		CITY:	ZIP CODE:
		COUNTY:	

CLAIM NUMBER:

MARITAL STATUS		MEDALS		DISCHARGE AVAILABLE		SERVICE NO:	
MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SINGLE <input type="checkbox"/>		PH <input type="checkbox"/> BS <input type="checkbox"/> SS <input type="checkbox"/>		YES <input type="checkbox"/> NO <input type="checkbox"/>		SS NO:	
DIVORCED <input type="checkbox"/> SEPARATED <input type="checkbox"/>							
MILITARY STATUS		PERIOD OF SERVICE (CEMETERY USE ONLY)		ACTIVE DUTY DATES		RESERVE DATES	
ACTIVE DUTY <input type="checkbox"/>		WWI <input type="checkbox"/> PEACETIME <input type="checkbox"/>		ENTERED		RELEASED	
RETIRED <input type="checkbox"/>		WWII <input type="checkbox"/>					
VETERAN <input type="checkbox"/>		KOREA <input type="checkbox"/>		HIGHEST RANK		BRANCH	
RESERVE <input type="checkbox"/>		VIETNAM <input type="checkbox"/>					

NEXT OF KIN INFORMATION (IF MARRIED, SPOUSAL INFORMATION)

PHONE NUMBER			RELATIONSHIP				
			SPOUSE <input type="checkbox"/> SON <input type="checkbox"/> DAUGHTER <input type="checkbox"/> MOTHER <input type="checkbox"/> FATHER <input type="checkbox"/> SISTER <input type="checkbox"/> BROTHER <input type="checkbox"/> OTHER: DEPENDENTS YES <input type="checkbox"/> NO <input type="checkbox"/> AGE(S)				
DOB OF WIDOW(ER)	VET ALSO	SS# OF WIDOW(ER)	** DEPENDENTS ARE DEFINED BY CHILDREN PASSING BEFORE AGE 21 AND/OR MEDICALLY DEPENDENT CHILDREN WITH SUPPORTING MEDICAL DOCUMENTATION				
YES <input type="checkbox"/> NO <input type="checkbox"/>							

RELIGIOUS DATA

RELIGIOUS DENOMINATION OF DECEASED			RELIGIOUS EMBLEM (SEE BACK FOR MORE OPTIONS)		BURIAL PREFERENCE		
CHRISTIAN <input type="checkbox"/>			STANDARD CHRISTIAN CROSS <input type="checkbox"/>		FULL CASKETED BURIAL <input type="checkbox"/>		
OTHER <input type="checkbox"/> _____			OTHER <input type="checkbox"/> # _____		CREMATION: IN GROUND <input type="checkbox"/> COLUMBIARIUM (IF AVAILABLE) <input type="checkbox"/>		
NONE <input type="checkbox"/> (#99)							

BGWCDVMC - BURIAL REGULATIONS

WHEN THE SPOUSE AND/OR DEPENDENT OF A VETERAN PREDECEASES THE VETERAN, INTERMENT AT THE BRIGADIER GENERAL WILLIAM C DOYLE VETERANS MEMORIAL CEMETERY IS PERMITTED WITH THE STIPULATION THAT UPON THE DEATH OF THE VETERAN HE/SHE AGREES TO BE INTERRED WITH THE SPOUSE AND/OR DEPENDENT.

FAILURE TO COMPLY WITH THIS REGULATION WILL RESULT IN THE DISINTERMENT OF THE VETERAN'S SPOUSE AND/OR DEPENDENT AT THE COST OF THE NEXT OF KIN.

PLEASE NOTE: A PRE-REGISTRATION IS NOT A GUARANTEE OF A RESERVED GRAVE.

I HAVE READ AND UNDERSTAND THIS REGULATION AND WILL COMPLY.

X _____

TO PRE-REGISTER: Attach a copy of DD214/separation papers, discharge certificates. Documents must indicate active duty service dates.

EMAIL DOCUMENTS TO: cemetery@dva.nj.gov

OR

MAIL DOCUMENTS BACK TO THE CEMETERY:
 B/G WILLIAM C DOYLE VETERANS MEMORIAL CEMETERY
 350 PROVINCELINE ROAD
 WRIGHTSTOWN, NJ 08562