

# Reprint Celebrant Certificate

Submit this form along with your payment to InSight. If your name has changed, include the name you used when you went through training as well as your current name and indicate which to use on certificate. We will also use the info on this form to update your information on our Celebrant list. If you are connected with a particular funeral home or you have a business for your Celebrant work, include the name under firm.

*You may also request a digital copy of your certificate at no charge. Please indicate if you want both printed & digital.*

**Name to print on certificate:** \_\_\_\_\_

**Billing Address:**

Firm (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ State/Prov \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Country \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_

**Shipping Address (if different than billing address):**

Firm (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ State/Prov \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Country \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_

**Submit form to: InSight, Attn: Kathy Burns, 801 W Covell Rd, Edmond OK 73003  
or email the information to [Kathy@InsightBooks.com](mailto:Kathy@InsightBooks.com). The cost for a new certificate is \$9.00 to cover shipping**

**Method of Payment:**

- Payment Enclosed  Please email a digital copy of my certificate at no charge  
 cash  check # \_\_\_\_\_  
 Please email an invoice to be paid online  
 Charge to VISA, Master Card, American Express, Discover (fill in info below)

Card # \_\_\_\_\_ Exp Date \_\_\_\_\_

CVC Code \_\_\_\_\_ Cardholder Signature \_\_\_\_\_

**For In-Sight Books use only:**  Payment Received  Certificate Printed/pdf prepared  Date mailed/emailed \_\_\_\_\_