**Planning your Funeral Service is a personal choice.**

This guide will identify your wishes and help make your

funeral service planning easier for family and friends.

Fill out the sections that are important to you

and regularly review and update your wishes.

Ensure your closest family or friend knows where to find this document.

***Tip:* It is also a good idea to send a copy to your preferred Funeral Celebrant *(see page 4).***

|  |  |
| --- | --- |
| Your Name |  |
| Date |  |

# 

Service Type

What type of service do you wish to have?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Funeral Service |  | Memorial service ( held after body has been buried or cremated) |

**Do you want the service to be:** *Circle applicable descriptive words/phrases*

|  |  |  |  |
| --- | --- | --- | --- |
| A celebration | Informative | Funny | Informal |
| Dignified | Inclusive | Short & sweet | Filled with music |
| Solemn | Serious | Formal | Private |
| Open to anyone |  | Opportunity for family to express their feelings | |
| *Add other words:* |  | | |

Preferences

|  |  |
| --- | --- |
| Burial, cremation, aquamation, other? |  |
| Is there anyone you would NOT want to be there? |  |
| Do you want a colour or theme funeral? Detail |  |
| If cremated, *place or scatter my ashes at ………* |  |
| Preferred location of funeral service |  |
| Other preferences – please detail |  |

You

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name |  | Maiden Name |  |
| Date of Birth |  | Place of Birth |  |
| Parents’ Names |  | | |
| Siblings |  | | |
|  |  | | |

Education

|  |  |  |  |
| --- | --- | --- | --- |
| Primary School |  | High School |  |
| Tertiary Studies |  | | |
|  |  | | |

Career – highlights and dates

|  |
| --- |
|  |
|  |
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|  |
|  |
|  |
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|  |

|  |
| --- |
| DESCRIBE WHAT YOUR CHILDHOOD WAS LIKE |
|  |
| WHAT ARE SOME OF YOUR MEMORIES FROM THOSE DAYS? |
|  |
| WAS SCHOOL A POSITIVE EXPERIENCE FOR YOU? WHAT MADE IT THAT WAY? |
|  |
| DO YOU STILL HAVE FRIENDS THAT YOU MET AS A CHILD? If so, NAmes and WHERE THEY LIVE/PHONE |
|  |
| DESCRIBE YOUR TEENAGE YEARS |
|  |
| your adult life – marriage and family and/or other highlights. Include dates/places |
|  |
|  |
| favourite places and/or travel stories |
|  |
| HObbies / interests / favorite books? |
|  |
| MUSIC – what are your favorite SONGs and/or what music do you want at your service |
|  |
| POEMS – READINGS – are there any readings you would like at your funeral? Name/author |
|  |
| tributes – who do you wish to speak at your funeral? |
|  |

Add additional documents or pages you may wish to include with your wishes.

|  |  |
| --- | --- |
| YOUR signature | **Preferred Funeral Celebrant** |
|  |  |
| Date | Contact Phone |
| Updated | Email |