

A Time to Plan



My Funeral  
Arrangements

- ◆ “Helping you celebrate the life of your loved one in the way they deserve.”
- ◆ “It is not about the price, it is about the value of celebrating the life.”
- ◆ “The first rule in funerals is .... there are no rules.”
  - ⇒ whatever seems appropriate, or significant, is proper.
  - ⇒ If a song has meaning – it should be sung.
  - ⇒ If there are special people who can share meaningful thoughts and insights into the life of a person, they should be heard.
  - ⇒ If there are special things that have meaning to the person, have them at the service.
- ◆ It is not always just about the service, but the after-care that will be provided by our caring, compassionate staff.
- ◆ Our service is available 24 hours, 7 days a week. Our team of dedicated, caring staff will meet with you in the comfort of your home, at any time that suits you.
- ◆ The service we offer is personalized, professional, appropriate and at all times, discreet.



In the event of my death, the following information has been recorded here to help family members organize my funeral. The information collected here will help ensure that the funeral service is carried out in line with my wishes.

I hope that in providing this information, I am able to spare you, my loved ones, from potentially difficult decisions at what I understand may be a troubling time. It may also serve to reassure you that the funeral service that you are arranging is as I would have wanted.

Remember, my funeral is held principally for your benefit - not my own. Take comfort from the ceremony and allow yourself this precious opportunity to grieve and grow through your loss.

## Personal Information

Full Name \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_

Place of Birth \_\_\_\_\_

Religion \_\_\_\_\_

Local Church \_\_\_\_\_

Occupation \_\_\_\_\_

Are you of Aboriginal or Torres Strait Island Origin? \_\_\_\_\_

## Nationality

By Birth \_\_\_\_\_

By Naturalisation \_\_\_\_\_

Date of Naturalisation \_\_\_\_\_

Resident of Australia Since \_\_\_\_\_

## Wife/Husband

Full (Maiden) Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Date of Death \_\_\_\_\_ Place of Death \_\_\_\_\_

Date and Place of Marriage \_\_\_\_\_

My age when I was married was \_\_\_\_\_

## Details of Previous Marriage(s)

Full (Maiden) Name \_\_\_\_\_

Date and Place of Marriage \_\_\_\_\_

Date of Death \_\_\_\_\_ Place of Death \_\_\_\_\_

My age when I was married was \_\_\_\_\_

## Information regarding my parents

Father's given names \_\_\_\_\_

Surname \_\_\_\_\_

Trade, profession or occupation is/was \_\_\_\_\_

Mother's given names \_\_\_\_\_

Mother's maiden name \_\_\_\_\_

Trade, profession or occupation is/was \_\_\_\_\_

## Children

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Date of Death \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Date of Death \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Date of Death \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Date of Death \_\_\_\_\_

## Other relevant contacts

Name and Address of Family Doctor \_\_\_\_\_

Name and Address of Solicitor \_\_\_\_\_

Date and Location of last Will \_\_\_\_\_

Name and Address(es) of Executor(s) \_\_\_\_\_

## Funeral Wishes

I would like my funeral to leave from (name and address of Church, Funeral Chapel etc):

\_\_\_\_\_ Cemetery.

Details are as follows: \_\_\_\_\_

The last person buried in this allotment was \_\_\_\_\_

on (date) \_\_\_\_\_ or I wish to be buried with \_\_\_\_\_.

I have no reserved allotment but would like to be buried in \_\_\_\_\_

Lawn/Monumental \* Cemetery (\* delete which is not applicable).

I request that I am cremated at \_\_\_\_\_ Crematorium

and that my ashes be \_\_\_\_\_.

Preferred Minister/Celebrant \_\_\_\_\_

Type of service required \_\_\_\_\_

Flowers Yes/No Donations in lieu of flowers to \_\_\_\_\_

Hymns, songs or special requests \_\_\_\_\_

Please place funeral notices in the following newspapers \_\_\_\_\_

Other special instructions \_\_\_\_\_

## In the event of death

I would like the following persons notified of my passing:

Name \_\_\_\_\_ Relation \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relation \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relation \_\_\_\_\_ Phone \_\_\_\_\_

## Membership

List of Clubs and Organisations I would like to participate in my funeral \_\_\_\_\_

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## Other Information

I have a pre-arranged/pre-paid Funeral Benefit Plan with (Name and Address of Company)

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I have a Life Insurance Policy with (Name and Address of Company) \_\_\_\_\_

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\_\_\_\_\_ Policy Number: \_\_\_\_\_

I have Superannuation with (Name and Address of Company) \_\_\_\_\_

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I have private Health Cover with (Name and Address of Company) \_\_\_\_\_

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\_\_\_\_\_ Member Number: \_\_\_\_\_

## Bank Account Details

Name and Branch of Bank \_\_\_\_\_

Account Name \_\_\_\_\_ Account Number \_\_\_\_\_

Name and Branch of Bank \_\_\_\_\_

Account Name \_\_\_\_\_ Account Number \_\_\_\_\_

Name and Branch of Bank \_\_\_\_\_

Account Name \_\_\_\_\_ Account Number \_\_\_\_\_

**File Numbers**

Centrelink File No. \_\_\_\_\_

Tax File No. \_\_\_\_\_

Veterans Pension No. \_\_\_\_\_

Driver's Licence No. \_\_\_\_\_

**Location of Important Papers**

Birth Certificate \_\_\_\_\_

Marriage Certificate \_\_\_\_\_

Savings Bank Book and Cheque Book \_\_\_\_\_

Share Certificates/Bonds/Securities, etc \_\_\_\_\_

Personal Insurance Policies \_\_\_\_\_

Private Health Insurance/Medicare Care Cards \_\_\_\_\_

Superannuation Papers \_\_\_\_\_

The original and any copies of my Will \_\_\_\_\_

The Deed for each piece of real estate:

My Home \_\_\_\_\_

Other pieces of real estate \_\_\_\_\_

The Insurance Policies on my property:

My Home \_\_\_\_\_

Other pieces of real estate \_\_\_\_\_

Service Record and Discharge Certificate \_\_\_\_\_

Location of any other documents (please specify) \_\_\_\_\_

\_\_\_\_\_

**Signature:** \_\_\_\_\_

Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_

Supplied and printed by

Childers Woodgate

Funeral Services

Childers

41 263 821

