



**Vital Statistics**

Beside the information gathered in the process of pre-planning this funeral, identified in the panel on the left side of the page, information necessary to complete the death certificate and other legal documents will be required at the time of death. Rather than burdening family and loved ones with that obligation you will want to provide the information in advance in The Instruction Guide. All information requested is for the individual for whom the funeral has been arranged.

Birthplace: \_\_\_\_\_  
City State Country

Citizenship: \_\_\_\_\_ Residence Established: \_\_\_\_\_  
Country Year

Spouse: \_\_\_\_\_  
First Name Last Name Maiden Name

Father: \_\_\_\_\_  
First Name Last Name Birthplace

Mother: \_\_\_\_\_  
First Name Maiden Name Birthplace

Employed By: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Company Name or Retired

Education: Highest Grade Completed - Elementary/Secondary \_\_\_\_\_ College \_\_\_\_\_  
0-12 1 to 4, or 5+

Military Service: \_\_\_\_\_ Discharge Papers: Yes / No  
Branch of U.S. Armed Forces

Date of Entry: \_\_\_\_\_ Place: \_\_\_\_\_

\_\_\_\_\_ Date City State

Date of Discharge: \_\_\_\_\_ Place: \_\_\_\_\_

\_\_\_\_\_ Date City State

Type of Separation: \_\_\_\_\_  
Honorable, Medical, etc.

**Religious Affiliations and Services**



Preferences in religious ceremonies or rituals can hold special significance to those with religious faith. Religion can also play a meaningful and important role in providing comfort to surviving family members and loved ones.

Religious Affiliation: \_\_\_\_\_ Church: \_\_\_\_\_  
Religion Place of Worship

Officiating Clergyman: \_\_\_\_\_ Title: \_\_\_\_\_  
Name

Music - Hymns: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Musicians - Organist - Choir: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other Participants: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Details of Service: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Fraternal or Other Organizations**



During one's life many groups and organizations become an integral part of living. Whether it be strong union membership, fraternal affiliations or service clubs, these affiliations experience the loss of one of its members and have a need to participate in the celebration of the member's life at the time of death.

Organization(s): \_\_\_\_\_

Name	Contact
_____	_____
Name	Contact
_____	_____
Name	Contact
_____	_____
Name	Contact
_____	_____

Special Arrangements: \_\_\_\_\_

\_\_\_\_\_

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Fraternal or Other Group Services: \_\_\_\_\_

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**Visitation and Cermonial Details**

\_\_\_\_\_





Out of Town Relatives & Close Friends to Notify:

Name	Relationship	Location	Telephone Number
Name	Relationship	Location	Telephone Number
Name	Relationship	Location	Telephone Number
Name	Relationship	Location	Telephone Number

Preferred Cemetery or Mausoleum: \_\_\_\_\_

Name

Owned:     Cemetery Grave             Mausoleum Crypt             Urn Niche

Location of Ownership Deed: \_\_\_\_\_

Disposition of Ashes (If Cremated): \_\_\_\_\_

Special Instructions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Special Requests**

Each of us is an individual with individual wants and desires, even when it comes to making funeral arrangements. This section is set-aside for you to make personal requests to handle such matters in a



way that many would not think of or possibly even care about. Such thoughts as how jewelry would be treated, whether left on or removed, the clothing to be worn, any unusual transportation request such as the procession passing by the home on the way to the church or cemetery, the kind of flowers preferred, and whether or not contributions would be directed to a particular charity, are appropriately identified here.

Flowers: \_\_\_\_\_

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Suggested Pall Bearers: \_\_\_\_\_

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Memorials: \_\_\_\_\_

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Other Requests: \_\_\_\_\_

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