

FUNERAL AND BURIAL/CREMATION INSTRUCTIONS

FOR: _____

The Following People Should Be Informed Of My Death:

[NAME]

[PHONE]

Please Use The Following Funeral Director/Home: _____

_____ I Want To Be Buried

I Want To Be Buried At: _____

_____ I Want Military Honors, If Available

I Want To Be Buried Next To: _____

I Want My Headstone To Say: _____

Other Instructions: _____

_____ I Want To Be Cremated

I Want My Ashes Kept At: _____

I Want My Ashes Scattered At: _____

I Want A Plaque/Memorial At: _____

Which Says: _____

Other Instructions: _____

___ I Want A Memorial Service
To Take Place At: _____

Second Choice, If Not Available: _____
The Service Should Be:

- ___ Open Casket, If I'm Suitable For Viewing
- ___ Closed Casket
- ___ No Casket [My Remains Do Not Need To Be Present]

If Casket Will Be Present, I Would Like These Pallbearers:

I Want This Person To Officiate: _____

Second Choice, If Not Available: _____

I Want The Following Songs/Hymns Performed:

I Want The Following Readings/Scriptures/Poems Read:

___ I Want People To Be Given An Opportunity To Tell Stories About Me

Other Things I Want At The Service: _____

Instructions Regarding Reception: _____

Other Memorial Services Requests: _____

Instructions Regarding Reception: _____

Please Make All Arrangements Consistent With The Custom/Rites Of The Following Religion/Belief System: _____

I Would Like The Following In My Obituary: _____

Spouse: _____

Children: _____

Other Loved Ones: _____

Birth Date and Location: _____

Education: _____

Military Service: _____

Occupation: _____

Special Achievements: _____

Religious Affiliation: _____

Other: _____

_____ My Obituary Should Request Donations To: _____

Other Wishes:

I, _____, hereby confirm the above terms and release any person from liability for complying therewith.

NAME

On this ____ day of _____, in the year, _____,

before me, _____, appeared _____
(insert name of notary)

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this instrument, and acknowledged that the person executed it.

Notary Seal

Notary in and for the state of _____
My Commission Expires: _____