

Memorial Preferences of _____

This document is intended to help my family and friends at the time of my passing. It states my wishes for final arrangements after my death.

1. **My Representative.** The person I designate to oversee my plans and all related arrangements outlined below is: _____, whose current e-mail address, phone number, and mailing address is: _____

2. **Alternate Representative.** If my representative named above is unable or unwilling to oversee my plans and all related arrangements outlined below, I designate: _____, whose current e-mail address, phone number, and mailing address is: _____

3. **Request to Honor My Memorial Preferences.** These are my memorial preferences so please honor my plans as outlined below, as long as doing so would not create any undue burden or financial hardship.

4. **Services.** The following are my preferences for various types of services:

a. Memorial Service or Wake: _____

b. Viewing: _____

c. Funeral: _____

d. Graveside or Burial Service: _____

e. Religious Preference for All Services: _____

5. **Disposition of Remains.** These are my preferences for cremation and/or burial, including burial plot location or what should be done with ashes after cremation. I would like my remains to be handled as follows: _____

6. **Flowers, Memorial Funds, and Donations:** _____

7. **Transportation to Gravesite:** _____

8. **Pallbearers.** Please ask the following individuals to serve as my pallbearers:

9. **Funeral Home.** I would like all arrangements for the disposition of my remains and related services to be performed by: _____ (*name of funeral home*), located at: _____.
I have: _____ I have not: _____ prepaid for any funeral services or arrangements.

10. **Headstone or Gravesite Marker and Epitaph:** _____

11. **Obituary:** _____

12. **People to Notify.** Please attempt to notify the following individuals of my death prior to the date of any funeral or other services: _____

13. **Other Memorial Preferences:** _____

In the event you locate more than one statement of my Memorial Preferences, please use the Memorial Preferences document with the latest or most recent date as it supersedes and replaces any Memorial Preferences documents I executed previously.

I, _____ (*print full name*), currently residing at: _____
_____ (*insert address*) declare that I have read these instructions and they accurately reflect my wishes for final arrangements upon my death.

Signature

Date