

FUNERAL PRE-PLANNING GUIDE

PERSONAL INFORMATION

Full Name: _____
Social Security _____
Date of Birth _____
Place of Birth _____
Race _____ Tribal Member _____
Father's Name _____
Mother's Maiden Name _____
Years of Education _____
Schools Attended _____
Usual Occupation _____
Kind of Business or Industry _____
Civic, Fraternal and Other Involvement

SPOUSE INFORMATION

Full Name (Include Maiden Name) _____
Social Security Number _____
Date of Birth _____
Date of Marriage _____
Place of Marriage _____

FAMILY INFORMATION

List of Family Members _____

Preceded Family Members _____

SERVICE INFORMATION

When arranging my funeral service, I would prefer the following:
Visitation held at _____
Services held at _____
Clergy _____
Musicians _____
Special Music _____
Pallbearers _____

Flowers _____
Memorials to _____

FINAL DISPOSITION

Burial _____ Cremation _____

CEMETERY INFORMATION

Name of Cemetery _____
Location of Cemetery _____

OTHER WISHES OR CONCERNS

VETERANS INFORMATION

***Need your DD 214
Branch of Service _____
Veteran of Which War _____
Tour of Duty _____
Military Honors Requested __ Yes __ No

