

# Funeral and Burial Instructions

## Funeral and Burial Instructions of \_\_\_\_\_

**To Whom It May Concern:**

*I have completed this document to provide instructions concerning my funeral and burial arrangements and/or requests. I have checked the instructions that apply and have marked those that do not apply with "N/A" or left them blank.*

**I have made funeral and/or burial arrangements with:**

Name: \_\_\_\_\_

Location of my signed agreement: \_\_\_\_\_

**I have not made funeral and/or burial arrangements**

**I wish to have a funeral, and for the funeral request that:**

The following person(s) make arrangements:

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

The funeral will be held at: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

The following religious observances will be conducted: \_\_\_\_\_

My remains shall be embalmed

There be an open casket

There be a closed casket

A viewing or wake will be held at: \_\_\_\_\_

The casket should be placed at: \_\_\_\_\_

The type of casket will be: \_\_\_\_\_

My burial clothing will be: \_\_\_\_\_

The following jewelry should be handled as follows: \_\_\_\_\_

Flowers for my funeral will be: \_\_\_\_\_

The pallbearers will be: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***I wish to have a burial, and for the burial request that:***

- The following person(s) make arrangements:

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

- The following religious observances will be conducted: \_\_\_\_\_

- I will be buried at:

Cemetery: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

- Flowers for my burial will be: \_\_\_\_\_

***I wish to be cremated, and for the cremation I request that:***

- The following person(s) make arrangements:

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

- My cremated remains be:

- Placed in a columbarium or mausoleum:

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

- Buried in a cemetery plot:

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

- Retained at the home of: \_\_\_\_\_

- Stored in a house of worship or religious shrine, if local zoning laws allow

- My ashes are scattered, in accordance with local laws

- The religious observances to be conducted will include: \_\_\_\_\_

***I wish to have a:***

- Memorial**,  **Monument**,  **Marker**, **and leave the following instructions:**

\_\_\_\_\_  
\_\_\_\_\_

***I wish that the following service(s) take place:  Funeral Service,  Service at Casket Burial,  Memorial Service,  Service at Disposition of Cremated Remains, and request that:***

- The following person(s) make service arrangements:

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Service(s) will be conducted by:

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Flowers for my service(s) will be: \_\_\_\_\_

Instead of flowers, people donate to the following charities or causes: \_\_\_\_\_

The following music be included in the service(s): \_\_\_\_\_

The following reading(s) or scripture(s) be included in the service(s): \_\_\_\_\_

The following person(s) speak publicly at the service(s): \_\_\_\_\_

The following person(s) not speak publicly at the service(s): \_\_\_\_\_

To be honored as a veteran by including: \_\_\_\_\_

To be honored as a member of \_\_\_\_\_ by including: \_\_\_\_\_

Transportation arrangements to the services will be: \_\_\_\_\_

The content, style, length and timing of my service(s) will also include \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***I would like the following persons to be notified as soon as possible after I pass away:***

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

***I have written my obituary, and it may be found at:*** \_\_\_\_\_

\_\_\_\_\_

***I have not written my obituary, but hope that it includes the following:*** \_\_\_\_\_

\_\_\_\_\_

*I would like the following newspapers and organizations to receive notice of upcoming services as soon as possible after I pass away :*

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Concerning the financial costs of my arrangements:**

Arrangements referred to in this document have been prepaid to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

To pay for my arrangements, I have set up a joint or pay-on-death account at the following financial institution:

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Final Instructions**

Written instructions concerning donation of my organs and tissues may be found at: \_\_\_\_\_

The ethical will I have written that spells out my values and views about life may be found at: \_\_\_\_\_

My additional wishes or thoughts are: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I direct my chosen agents, family members and/or other responsible persons, to take all steps necessary to carry out the above instructions.

Dated:

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_