FUNERAL WISHES

Please fill in any details that are important to you and/or you would like included in the services following your entrance into eternity. Leave blank those areas that do not apply. Be specific with details and/or quotes. *Please print.*

Date _____

Name _____

Address_____

_____

_____

Phone # _____

Current Marital Status & Marital History You'd Like Listed _____

_____

_____

Children _____

_____

_____

Employment History _____

_____

_____

Military Experience _____

_____

_____

Ministry _____

_____

_____

Passions, Hobbies, Free Time Activities_____

_____

_____

Favorite Scripture Verses, Hymns, Songs, Poems, etc. _____

_____

_____

Personal Influences/Mentors _____

_____

What is the primary thing that you would like conveyed at your service? ____

_____

_____

_____

People you would like to speak at your service _____

_____

Next of Kin and or Friends Contact info _____

_____

_____

Please feel free to attach a page with any additional wishes you may have.

Note: We cannot guarantee that any or all of this information will be used. Your family will however be given your wishes.

This form will remain in a locked office and kept confidential until the event of your death. You may update as desired.