Funeral and Burial Instructions

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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: ___________________________


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☐ 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__________________________________________________________

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