



BEFRIENDER
MINISTRY

**Funeral Preparation &
Personal Arrangement Guide**

No one knows what your wishes are unless you make them known. That's true in life and in death. By pre-planning your funeral arrangements, you make a most difficult time a little easier for your loved ones. It is hard enough to deal with a loss without wondering if you've made the best decisions. This pre-planning guide is designed to help outline your preferences as well as organize other important information.

“Do you not know that all of us who have been baptized into Christ Jesus were baptized into his death? Therefore, we have been buried with him by baptism into death, so that, just as Christ was raised from the dead by the glory of the Father, so we too might walk in newness of life.”

Romans 6:3-4

Personal Planning Guide

Personally prepared by: _____

Dear family and friends,

This “being prepared” booklet contains an outline of my final wishes and additional information that will be helpful in completing any necessary forms.

It is my hope that this information provides comfort and guidance with making final arrangements and, rather than be burdened with so many decisions, that you will be free to remember the happy years we shared together.

Love, _____

Signed: _____

Date: _____

Witness: _____

Making pre-arrangements can vary from discussing wishes with your family and recording notes in this guide to meeting with your funeral director and choosing funeral items and services. The amount of detail that is included in your funeral pre-planning is up to you. Some people prefer to include only general things such as type of service and cemetery information. Others prefer to include background information for the obituary, service details, selection of the casket, vault or urn, and more. When making pre-arrangements it is important to do what is comfortable to you. We also encourage you to involve your family.

There are five sections to this pre-planning guide.

1. End of life wishes: living will, medical power of attorney, organ donation decision, autopsy wishes and power of attorney (non-medical).
2. Funeral service preferences
3. Vital statistics
4. Background
5. Record of important personal papers

Important notice to the preparer of this guide:

This booklet should be readily available to your family and friends at all times. It is strongly recommended that you notify them of the location of this book. Do not keep in a safety deposit box or with a will since it may not be found until after the services have taken place. *(This guide can be kept in a file at the church, if you wish.)*

Funeral Service Preferences

Today there are unlimited options with planning funeral and memorial services. The services can be designed to be as special and unique as the individual. When planning services, we suggest that you use this section as a guideline for your loved ones. Since the funeral service is primarily for the benefit of the survivors, it is important to consider the needs of your family. Your family may also find healing with being involved in planning some of the details of the service.

Person likely to be in charge of the final arrangements:

Name: _____

Phone: _____ Relation: _____

Funeral home likely to be in charge of the final arrangements:

Name of Funeral Home: _____

Phone: _____

Are advance arrangements made at funeral home? Y / N

VISITATION

(For both earth burial and cremation services)

- I would like a visitation with public reviewal.
- I would like a visitation with no reviewal.

Visitation to be held at:

Funeral home Church Other location:

- I prefer to have a private, family only reviewal.
- I do not want a visitation or reviewal.

Service

(For both earth burial and cremation services)

Services to be held at:

Readings:

Songs/Hymns:

Soloist:

Organist/Pianist:

Memorials to be indicated for:

_____ Our Saviour's Lutheran Church

_____ Other (please specify) _____

Other notes:

Pallbearers/Honorary Pallbearers:

Disposition

- **EARTH BURIAL** (with casket)

Name of Cemetery:

Location of Cemetery:

Is the grave already owned? Yes No

If yes, please provide any possible details such as the section, lot number or family plot the grave is in:

- **CREMATION**

I prefer to have my ashes:

- Buried in _____ cemetery

Cemetery Location: _____

Is the grave already owned? Yes No

If yes, please provide any possible details such as the section, lot number or family plot the grave is in: _____

- Scattered at: _____
- OSLC Columbarium: _____
- Other: _____

Vital Statistics

Full Legal Name:

First: _____

Middle: _____

Last: _____

Maiden Name: _____

Marital Status: [] Married [] Divorced

[] Widowed [] Never Married

Spouse's Name: _____

If wife, specify her maiden name: _____

Current Address:

Street: _____

City: _____

County: _____ Township: _____

State: _____ Zip: _____

Date of Birth: _____

Place of Birth: _____

Dates & place of baptism: _____

Dates & place of confirmation: _____

Years of Primary/Secondary Education: (0-12): _____

Years of College: _____ **Degree:** _____

U.S. Veteran: Yes No

If yes, which branch of service? _____

Rank: _____

Date of entry: _____

Discharge date: _____

(You may want to keep a copy of the discharge paper with this booklet)

Parent(s)' Name(s):

Father: _____

Mother: _____

Mother's Maiden Name: _____

Your Occupation: _____

Which type of business or industry? _____

Children and their locations of residence:

Brothers and sisters and their locations of residence:

Number of grandchildren: _____

Number of great-grandchildren: _____

If married, where did you get married?

Marriage date: _____

Attend church at: _____

**Other religious, fraternal and charitable organizations
you belong to:**

Achievements: (personal and/or professional)

Background

Where did you grow up?

What schools did you attend?

Graduation date(s) & certificates/degrees earned:

Hobbies:

Additional Background Information

Record of Important Personal Papers

Where to locate the following documents:

Social Security Card/Number: _____

Birth Certificate: _____

Marriage Certificate: _____

Military Records & I.D. Number: _____

Living Will: _____

A “living will” will explain your medical wishes to your loved ones in case of a life-threatening crisis or chronic illness.

Organ Donation: _____

You are encouraged to consider giving a living gift by donating your body or useable organs at the time of your death. Please note that body or organ donation to a medical school or hospital requires proper legal documents signed by you.

Autopsy: _____

Families often hesitate to authorize an autopsy without knowing the wishes of their loved one. Autopsies can help to provide answers and closure for families.

Last Will and Testament: _____

Name & phone number of lawyer: _____

Deeds and Titles: _____

Auto Insurance Policy & Title: _____

Health Insurance Policy: _____

Life Insurance Policies: _____

Income Tax Information: _____

Location of Bank Accounts: _____

Stocks/Investments: _____

IRA/Pension: _____

Outstanding loans & credit obligations: _____

Other Papers:

Safe Deposit Box: Yes No

If yes, location: _____

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