

# Funeral details and wishes

**DECEASED DETAILS** 

Planning a funeral or even pre-planning a funeral can be difficult for all involved. Newhaven Funerals NQ has put together the next section of the booklet so information can be gathered and wishes noted prior to meeting with a funeral director. Either in your own home or at our office, we are here to help you complete the personal and funeral details in the following pages.

Given Names:					
Surname:					
Last Known Addres	S:				
Date of Birth:					
Place of Birth (City,	State, Country):				
Date of Death:					
Place of Death:					
Occupation During	Working Life:				
MARRIAGE DETAIL	c				
		Manuiad	Diversed	Widowod	
Marital Status:	Never Married	Married	Divorced	Widowed	
1st Marriage:					
Town and State of Marriage:			Age When N	Age When Married:	
Full Name of Spouse at time of marriage:					
2nd Marriage:					
Town and State of Marriage:			Age When M	larried:	
Full Name of Spouse at time of marriage:					
	J				
3rd Marriage:					
Town and State of Marriage:			Age When N	1arried:	
Full Name of Spous	e at time of marriage:				



#### **PARENT'S DETAILS**

ather's Given Names:	
ather's Surname:	
Father's Occupation During Working Life:	
Mother's Given Names:	
Mother's Maiden Name:	
Mother's Occupation During Working Life:	

## CHILDREN'S DETAILS - (Including any deceased children)

Given Names:	D.O.B:	Dec'd:	Yes No
Given Names:	D.O.B:	Dec'd:	Yes No
Given Names:	D.O.B:	Dec'd:	Yes No
Given Names:	D.O.B:	Dec'd:	Yes No
Given Names:	D.O.B:	Dec'd:	Yes No
Given Names:	D.O.B:	Dec'd:	Yes No
Given Names:	D.O.B:	Dec'd:	Yes No
Given Names:	D.O.B:	Dec'd:	Yes No
Given Names:	D.O.B:	Dec'd:	Yes No

### **NEXT OF KIN / INFORMANT DETAILS**

Next of Kin Name:
Next of Kin Address:
Next of Kin Postal Address:
Next of Kin Contact Phone Number:
Next of Kin Email Address:



### **FUNERAL DETAILS**

Burial: Yes No		
Name of Cemetery:		
Do you own an existing plot: Yes No		
Cremation: Yes No		
Name of Crematorium:		
What is to happen with the ashes:		
LOCATION OF SERVICE		
Funeral to be held at: Church Chapel Graveside Other:		
Name of Service Venue and Address:		
Person to Officiate the Service: Minister Celebrant Other:		
FUNERAL OPTIONS		
Clothing to be dressed in: Yes No Items:		
Viewing: Yes No		
Flowers: Yes No Type: Natives Roses Mixed Other:		
Donations in Lieu of Flowers: Yes No Charity:		
Newspaper Notice: Yes No Publications: Facebook: Yes No		
Slideshow Photographic Memories: Yes No		
Music - Name of Song 1: Artist:		
Name of Song 2: Artist:		
Name of Song 3: Artist:		
Name of Song 4: Artist:		
Name of Song 5: Artist:		
Memorial Book: Yes No Order of Service Booklets: Yes No		
Live Streaming: Yes No Pall Bearers: Yes No		
Wake: Yes No Location:		