







In the event of my death, I have recorded the following information here to help family members organise my funeral. This information will help ensure that the funeral service is carried out in line with my wishes.

I hope that, in providing this information, I am able to spare you, my loved ones, from potentially difficult decisions at what may be a troubling time. It may also serve to reassure you that the funeral service that you are arranging is as I would have wanted.

You may face the challenges of balancing my wishes with your own needs as mourners. Know that it is okay to put your needs first. Seek to fulfil the essence of my wishes, rather than the individual details. Remember, my funeral is held principally for your benefit, not my own. Take comfort from the ceremony and allow yourself this precious opportunity to grieve and grow through your loss.

NAME:

DATE:

MY DETAILS

My given names are:	
My surname is:	My date of birth is:
I would like my funeral to leave from/be held at (name a	nd address of church, funeral chapel etc.):
I have an allotment in	Cemetery. Details are as follows:
The last person buried in this allotment was:	
	on (date):
I have no ground but would like to be buried in	Cemetery.
I request that I am cremated at	Crematorium
and that my ashes be:	
REGISTRATION OF DEATH	
The following information is required by government au	thority for registration of death:
My given names:	
My surname:	
Occupation:	
Former occupation, if retired:	
Old age, military or invalid pension (state which):	

My date of birth	ı is:		I was born a	t:	
If widowed, plea	ase state	date and place of death	of wife or husband:		
Date:			Place:		
MY PARENT My father's give					
My father's surr		•			
Trade, professio		upation is/was:			
My mother's giv	en name	es:			
My mother's ma	aiden nar	me:			
MY MARRIA		TAILS Town:	State:	Country	
I was married a	t (2nd)	Town:	State:	Country	
My age when I	was marr	ried was:			
1st:	years				
2nd:	years				
I married:	Given	names in full (1st):			
	Surnai	me (1st):			
	Given	names in full (2nd):			
	Surnai	me (2nd):			

MY CHILDREN'S DETAILS

My living children from my first marriage

Name:	Date of birth:	/	/
Name:	Date of birth:	/	/
Name:	Date of birth:	/	/
Name:	Date of birth:	/	/
Name:	Date of birth:	/	/
My living children from my second marriage			
Name:	Date of birth:	/	/
Name:	Date of birth:	/	/
Name:	Date of birth:	/	/
Name:	Date of birth:	/	/
Name:	Date of birth:	/	/
My deceased children were:			
By my first marriage			
Males:	Females:		
By my second marriage			
Males:	Females:		

LEGAL DETAILS

My will is lodged with:		
		who are to be notified as soon as possible.
My solicitor is:		
I would like the following persons to be	notified of my passi	ng:
Name:	Relation:	Phone:
I have a funeral benefit plan with:		
I have a life insurance policy with:		
NOTES AND REQUESTS		



HELPFUL NOTE

Our preplanning ladies are available to help you complete your future requirements. Phone freecall 1800 803 196 to arrange an appointment in your home or at the Burstows Funeral Information and Preplanning Centre.

FLORAL TRIBUTE No flowers please. I would prefer a donation go to this charity: I love flowers and hope you would like to honour me with a floral tribute. I particularly like the following flowers (type/colour): I really would not want: MUSICAL PREFERENCES I would like: Organist Singer Piper Recorded music Other I would like the following music, hymns and/or songs at my funeral: 1 2 3 4 5

REQUESTS

decide
decide
decide
decide
decide

PERSONAL REFLECTIONS

I offer the following personal reflections to help those preparing my eulogy.
Some special childhood memories are:
My first job was:
How I met my spouse:
My favourite family memories (e.g. holidays, gatherings):

Something that most people don't know about me (could be embarrassing moments or phobias etc.):
Some of my personal achievements are:
Some of the proudest moments in my life are:
My life was significantly influenced by (may be people or events):





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Member National Funeral Directors Association of Australia



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