

BARE.



My Wishes

for remembrance and celebration of life.

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Planning Ahead for My Family

I have completed this booklet for you, my family. I wanted to take that extra burden away from you on my time of passing. This booklet has been completed with love, thought and all my heart. You will find practical information inside as well as how I want to be remembered together with my wishes.

This is for you.

My Wishes

I have penned my desired wishes in this booklet to help you in the choices you have to make. What's inside this booklet describes how I want to be remembered, and how I would like my life to be celebrated.

Although at the time you read this you may be sad,
I also want you to laugh and remember the good times.

With all my Love...

FOR MY FAMILY

● My Personal Details

Title: ☐ Dr ☐ Mr ☐ Ms ☐ Miss ☐ Mrs ☐ Other _____

Surname: _____

Given Names/s: _____

Sex: ☐ M ☐ F

Date of Birth: _____

Place of Birth: _____

If born overseas, date of arrival in Australia: _____

Aboriginal or Torres Strait Islander Origin: ☐ Yes ☐ No

Usual Residence: _____

Contact Information

Home: _____

Work: _____

Mobile: _____

Email: _____

Profession or occupation during working life: _____

● My Preferred Funeral Director

Name: _____

Phone: _____

Address: _____

● My Next of Kin

Name: _____

Phone: _____

Address: _____

● My Will is located at

Phone: _____

Address: _____

Date of Will: _____

● My Solicitor

Name: _____

Phone: _____

Address: _____

● Executor of my Will

Name: _____

Phone: _____

Address: _____

● I am an Organ Donor

☐ Yes ☐ No Reference number: _____

● My Personal Documents

Birth Certificate Location: _____

Marriage Certificate Location: _____

Medicare Card number: _____

Centrelink Pension Number: _____

Veterans Affairs Number: _____

Passport number: _____

Citizenship: _____

Drivers Licence Number: _____ State of Issue: _____

● My Family Details

Father's Name: _____

Usual occupation: _____

Mother's maiden name: _____

Usual occupation: _____

Marital Status: ☐ Married ☐ Widow/er ☐ Divorced ☐ Never married ☐ Separated

● My Spouse or Partner's Name

Spouse/Partner name: _____

Usual Occupation: _____

Place of Marriage: _____

My age at time of Marriage: _____

● My Children

1. Child's name: _____

DOB: _____ ☐ Female ☐ Male

2. Child's name: _____

DOB: _____ ☐ Female ☐ Male

3. Child's name: _____

DOB: _____ ☐ Female ☐ Male

4. Child's name: _____

DOB: _____ ☐ Female ☐ Male

5. Child's name: _____

DOB: _____ ☐ Female ☐ Male

● My Financial Information

Bank account details: _____

Bank Name: _____

Account number: _____ BSB: _____

Location of documents: _____

Income Tax Records

Tax File Number: _____

Location of Records: _____

Deeds of Property

Property address(es): _____

Mortgage details

Location of Records: _____

Lender reference number: _____

Address of lender: _____

Life insurance policies

Location of Records: _____

Superannuation

Details: _____

Stocks and shares

Location of Records: _____

Accountant

Name: _____

Phone: _____

Address: _____

Car Details

Registration Details: _____ State: _____

Location of documents: _____

Military Information

Branch of Service: _____

Service Serial Number: _____

Date Entered Service: _____ Place: _____

Date of Discharge: _____ Place: _____

Grade, rank or rating: _____

Wars/Conflicts served: _____

Societies/Clubs

Memberships and positions held: _____

● My Medical History

● My Funeral Service or Celebration of Life

These are my wishes

Do you have a pre-paid funeral? ☐ Yes ☐ No

If so, who with:

Mood of Service: ☐ Formal ☐ Informal

Do you wish to be: ☐ Buried ☐ Cremated?

Preferred Cemetery or Crematorium:

Celebrant/Clergy:

Religious Denomination:

Veteran service by:

Eulogy by:

Donations to:

Music selections:

Type of coffin/casket desired: ☐ Coffin ☐ Casket

Special verses/readings: _____

I would like a funeral notice: ☐ Yes ☐ No

If so, to be placed in which paper? _____

☐ I would like my funeral to be private and therefore no funeral notice to be placed.

Flowers/Donations

No flowers by request: ☐ Yes ☐ No

In lieu of flowers, I would prefer people make a donation to the following charity:

I would like the flowers in my floral tribute to include: _____

Clothing

My preference for my final garments are as follows: _____

Special Instructions

We suggest that you use this section to voice any special instructions and keep your instructions current. We recommend that you date these instructions to avoid possible confusion later.

● My Resting Place

A beautiful memorial ensures you are forever remembered and respectfully honoured. Having a memorial keeps your memory alive for future generations.

Memorialisation

Do you have an existing family connection with one of our cemeteries? _____

Do you own a site at one of our cemeteries? _____

If yes, location of site: _____

If yes, whose name is the property registered? _____

I Own/Prefer Burial: ☐ Crypt ☐ Grave

Cremation: ☐ Wall niche ☐ Garden

I wish part of my ashes to be scattered at (site location): _____

Remainder placed? _____

Plaque wording

I would like the following wording on my plaque/headstone: _____

● People to notify for me

In the event of my passing, I wish the following people to be notified:

Name: _____

Relationship: _____

Phone number: _____

Name: _____

Relationship: _____

Phone number: _____

Name: _____

Relationship: _____

Phone number: _____

Name: _____

Relationship: _____

Phone number: _____

● Sharing my story

Your life story is so important, and you should start by sharing it with your family and close friends. This can be a difficult conversation to start but so rewarding once you've taken the first step. Some things to help you get started:

Where I grew up: _____

Where I went to school: _____

Earliest memories: _____

Favourite times: _____

Hobbies and special interests: _____

Most important people in my life: _____

Where I went to school: _____

Greatest achievements: _____

Something most people don't know about me: _____

Acknowledgements I would like at my funeral: _____

Items to be displayed at my funeral: _____

● My Life, My Story

Signature:

Date:

B.