

BARE.

FOR REMEMBRANCE AND CELEBRATION OF LIFE

My Wishes.

A safe space to note your personal details, final wishes,
and cherished memories.

Welcome & guidance.

We're so glad we could help you take this step in planning your final wishes.

Completing this is a deeply thoughtful gift for the people you love. Here are a few thoughts to guide you before you begin:

- 1 Take your time:** Work through this at your own pace. You don't have to complete it all in one sitting.
- 2 Make it yours:** Answer the questions that matter to you, skip what doesn't, and feel free to add your own notes as you wish.
- 3 It's okay to update:** Your details or wishes may change over time. You can always cross notes out or add new pages.
- 4 Keep it safe:** Store this booklet somewhere secure and let a trusted family member, friend, or executor know where it is.

To my loved ones.

I've written down my wishes in this booklet to help guide you through the decisions ahead. Inside, you'll find practical information, how I'd like my life to be celebrated, and how I hope to be remembered.

While this may be a sad time, I hope you also find space to laugh and cherish the good memories we shared. Beyond the logistics, I hope it gives you peace of mind knowing these choices are what I truly wanted.

I filled out these pages to lift a little bit of weight off your shoulders when the time comes. It is written with care, love, and all my heart.

With all my love.

Signed:

Date:

What you'll find inside.

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About me & important contacts.

The details you will be asked for first: my key information and who to call.

My personal details.

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

Surname:

Given name/s:

Preferred name:

Date of birth:

Place of birth:

Citizenship:

If born overseas, date of arrival in Australia:

Sex:

Aboriginal or Torres Strait Islander origin: ☐ No ☐ Aboriginal ☐ Torres Strait Islander

Usual residence:

Profession or occupation during working life:

Religion, if any:

My contact information.

Home phone:

Work phone:

Mobile:

Email:

My next of kin.

Name:

Phone:

Address:

Relationship to me:

Email:

If my next of kin cannot be reached.

Name:

Phone:

Relationship to me:

Email:

My family details.

Father's name:

Mother's name:

His usual occupation:

Her usual occupation:

My spouse or partner.

Marital status:

☐ Married ☐ De facto ☐ Widow/er ☐ Divorced ☐ Separated ☐ Never married

Their name:

Their usual occupation:

Place of marriage or commitment:

My age at the time:

Details of any previous marriage/s or partnership/s:

My children.

In order of oldest to youngest, including any who have passed away.

1	Name:	Date of birth:	Phone:
2	Name:	Date of birth:	Phone:
3	Name:	Date of birth:	Phone:
4	Name:	Date of birth:	Phone:
5	Name:	Date of birth:	Phone:
6	Name:	Date of birth:	Phone:

Grandchildren and other family I'd like recorded:

Key people to notify.

Upon the event of my passing, I wish the following people to be notified.

1	Name:	Relationship:	Phone:
2	Name:	Relationship:	Phone:
3	Name:	Relationship:	Phone:
4	Name:	Relationship:	Phone:
5	Name:	Relationship:	Phone:
6	Name:	Relationship:	Phone:
7	Name:	Relationship:	Phone:
8	Name:	Relationship:	Phone:
9	Name:	Relationship:	Phone:
10	Name:	Relationship:	Phone:
11	Name:	Relationship:	Phone:
12	Name:	Relationship:	Phone:

Important documents & financial information.

Where important information is kept, so nobody has to search for it.

Where my personal documents are kept.

Birth certificate:

Passport:

Citizenship papers:

Anything else, and where:

Marriage certificate:

Driver’s licence:

Divorce or separation papers:

Who else has a key or access:

Identification & reference numbers.

Medicare card number:

Driver’s licence number:

Centrelink or pension number (CRN):

Passport number:

State of issue:

Veterans’ Affairs number:

My bank accounts.

Bank name:	BSB:	Account no:	Held in whose name:
Bank name:	BSB:	Account no:	Held in whose name:
Bank name:	BSB:	Account no:	Held in whose name:
Bank name:	BSB:	Account no:	Held in whose name:
Tax file number:		Location of income tax records:	

Property, mortgages & leases.

Property address(es), and whose name(s) they are held in:

Location of title deeds:	Mortgage lender:
Lender reference number:	Location of mortgage records:
Leases and other agreements (rental, storage, land, or equipment):	

Life insurance policies.

Insurer:

Insurer:

Location of records:

Policy number:

Policy number:

Other insurances (home, car, health, funeral):

Superannuation.

Fund name:

Nominated beneficiary:

Member number:

Location of records:

Investments.

Stocks, shares, bonds, and managed funds:

Broker or platform:

Location of records:

Debts & regular payments.

Loans, credit cards, and subscriptions that will need cancelling:

My will.

Note: If you don't yet have a will, you may wish to create one at bare.com.au/wills

My will is located at:

Date of will:

Executor of my will:

Name:

Phone:

Address:

My solicitor:

Name or firm:

Phone:

Address:

My accountant:

Name or firm:

Phone:

Address:

My financial adviser:

Name or firm:

Phone:

Address:

Vehicles.

Vehicle:	Registration number and state:
Vehicle:	Registration number and state:
Location of documents and keys:	Finance owing, if any:

Military service records.

Branch of service:	Service serial number:
Date entered service, and place:	Date of discharge, and place:
Grade, rank or rating:	Wars or conflicts served:

My social media accounts.

Primary email address:	Where my passwords are kept:	
Platform:	Username or handle:	Close, keep, or memorialise:
Platform:	Username or handle:	Close, keep, or memorialise:
Platform:	Username or handle:	Close, keep, or memorialise:
Platform:	Username or handle:	Close, keep, or memorialise:

Medical & care preferences.

What my doctors know, and what I would want if unable to advocate for myself.

My medical history.

Including conditions, surgeries, medications, and allergies.

My doctors & specialists.

General practitioner (GP):

Name and practice

Phone

Specialist:

Name and field

Phone

Specialist:

Name and field

Phone

Organ & tissue donation.

I am a registered organ donor: ☐ Yes ☐ No ☐ Unsure

Donor reference number:

Body or tissue donation program, if any:

Advance care wishes.

My advance care directive is kept at:

Who makes medical decisions for me:

My end of life wishes.

What I would like to be carried out in my honour.

A pre-paid funeral.

I have a pre-paid funeral: ☐ Yes ☐ No

If so, who with:

My preferred funeral director:

Plan number, and where documents are kept:

Their phone:

Burial or cremation.

I wish to be: ☐ Buried ☐ Cremated ☐ Whichever is preferred by my family

Preferred cemetery or crematorium:

Preferred venue for the service, if different:

I would like: ☐ A service before the cremation or burial ☐ A memorial afterwards ☐ No service

My resting place.

I have an existing family connection with a cemetery: ☐ Yes ☐ No

If yes, which one and where:

If I own a site, its location and whose name it is registered in:

If buried, I own or prefer a: ☐ Grave ☐ Crypt ☐ Vault

Who I would like to lead and take part.

Celebrant or clergy:

Their phone:

Religious denomination, if any:

Eulogy by:

Others I would like to speak, read, sing, or carry me:

Veteran service by:

Acknowledgements I would like made:

The feel of the day.

Mood of the service: ☐ Formal ☐ Informal ☐ A celebration ☐ Small and quiet

Music selections, and when I'd like them played:

Special verses, readings or poems:

Items, photographs, or displays I'd like at my funeral:

Refreshments or a wake afterwards:

Clothing, coffin, or casket.

My preference for my final garments, and where they can be found:

Jewellery or keepsakes to stay with me, or be returned to my family:

My preference is: ☐ Coffin ☐ Casket ☐ No preference

Type, timber or finish:

Flowers & donations.

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

☐ No flowers by request ☐ Family flowers only

In lieu of flowers, I would prefer people donate to:

Funeral notices.

I would like a funeral notice:

If so, which newspaper or website:

☐ Yes ☐ No

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

Additional instructions.

This may include who I'd like to attend my service and/or who I'd prefer not to attend.

If I am cremated.

I would like my ashes placed in a:

☐ Wall niche ☐ Garden ☐ Family grave ☐ Keepsake urn with my family

I wish for my ashes, or part of them, to be scattered at:

Where the remainder should be placed:

Who I would like to be there:

Memorialisation.

If I would like a memorial, these are my thoughts on it:

Type of memorial (plaque, headstone, tree, bench, other):

Plaque or headstone wording.

The words I would like, exactly as I'd like them to read.

My life, my story.

The memories, values, and experiences I leave behind.

Childhood, schooling & early life.

Where I grew up:

My earliest memories:

Where I went to school:

Hobbies, interests & achievements.

Hobbies and special interests:

My greatest achievements:

Something most people don't know about me:

My favourite memories:

Milestones & the people who matter.

The most special people in my life:

Milestones I'm proud of:

Life lessons I'd like to pass on:

Messages for my loved ones.

Note: Use extra paper if you need more room, and keep it with this booklet.

A hard time, made easier.

Whenever you need, we're here for you.

BARE.

bare.com.au
1800 071 176