

My Funeral and Burial Wishes

STATEMENT OF INTENT: The purpose of this document is to outline my final wishes pertaining to my burial and funeral arrangements in the event of my death. I hereby request that my survivors execute the wishes that I have outlined in this document.

MY NAME: _____
First Middle Last

MY ADDRESS: _____
Street City State Zipcode

APPOINTMENT OF PERSON: I would like the following person(s) to be in control of my funeral and burial:

1st Choice Name: _____ Telephone: _____

1st Choice Address: _____
Street City State Zipcode

1st Choice Email: _____

2nd Choice Name: _____ Telephone: _____

2nd Choice Address: _____
Street City State Zipcode

2nd Choice Email: _____

FUNERAL HOME: I would like the following Funeral Home/Funeral Coordinator:

Name: _____ Telephone: _____ Ext. _____

MY REMAINS *(Check all the apply)*

- I do NOT want to be EMBALMED.
- I do NOT want my body parts to be donated, removed or altered after death.

MY FUNERAL *(Check all the apply)*

- I want to have a VIEWING of my body, in a funeral home or Catholic Church with:
 - Open Casket Closed Casket Specify: _____
- I want the following CATHOLIC MASS to be said by a traditional Catholic Priest:
 - A Requiem High Mass with a church choir, if possible.
 - A Requiem Low Mass.
- I want to have people pray the ROSARY for the repose of my soul at my: Viewing Funeral
- I want the following on my MEMORIAL CARD *(see webpage for examples)*:
 - Images - Specify: _____
 - Prayers - Specify: _____
 - Other Text - Specify: _____
- I want a series of GREGORIAN MASSES (30 consecutive days) said for the repose of my soul.
 - I set aside money to pay for GREGORIAN MASSES - Specify: _____

MY BURIAL (Check all the apply)

I want to be BURIED in a cemetery on CONSECRATED GROUND according to the traditional practices of the Catholic Church with a priest praying at my Burial:

Cemetery Name/Location: _____

Specifications: _____

I want the cost of my casket to be: Inexpensive Moderate Premium

Specify: _____

I want flowers at my burial service:

Specify: _____

I want the following on my HEADSTONE:

Type of Stone - Specify: _____

Images - Specify: _____

Inscription/Epitaph - Specify: _____

MY PREPAID FUNERAL PLAN (Check if applicable)

Funeral Home Name: _____ Telephone: _____

I Prepaid for the following:

MY CATHOLIC CHURCH:

Church Name: _____ Telephone: _____

Church Address: _____
Street City State Zipcode

Priest's Name: _____ Telephone: _____

MY SIGNATURE: _____ **DATE:** _____

WITNESS SIGNATURE: _____ **DATE:** _____