Pre-Planning



Biographical Information

Full Name:			
Email Address:	Phone Number:		
Date of Birth:	Place of Birth:		
Residence History:			
Father's Full Name:	Father's City of Residence:		
Mother's Full Name:	Mother's City of Residence:		
Spouse's Full Name:	Spouse's Maiden Name:		
Survivors' Names and Cities of Residence:			
Deletive W/he lieve Due to de d Vevi in Desthe			
Relatives Who Have Preceded You in Death:			
Military Service			
Are you a Veteran? Yes No			
Branch of Service: Canadian Armed Forces C	Canadian Navy Canadian Airforce Canadian Coast Gu		
Veteran's Affair Number:			
Date Enlisted (m/d/y):			
Date of Discharge (m/d/y):			
Rank at Discharge:			
Location of a Copy of Discharge:			
Time of Military Service:			
Peacetime World War I World War	II Korean War Vietnam War Persian Gulf Wa		
Military Honors at Graveside: Yes No			
Flag Preference for Service: Drape Casket with Fl	lag Folded Flag on Casket		

Pre-Planning



Service Preference

Type of Service:						
Service at Funeral Home	Church	Graveside	Life Appreciation Service	None		
Visitation Hours:						
Two Days Visitation	One Day Visitation	Visitatior	a & Service Same Day	None		
Casket						
Open for Service	No Public Viewing					
Person in Charge of Arrangements:						
Officiating Clergy (List Clergy):						

Pallbearers (List up to eight pallbearers):

Flower Preference:

Music Selection:

Jewellery:	Give to Family	Leave Jewellery on				
Glasses:	Give to Family	Leave Glasses on	Donate to Lions Club			
Type of Casket: Wood Steel						
Disposition:	Ground Buria	l Mausoleum	Cremation			
Outer Container Preference (Ground Burial):						
Concrete Vault (air right protective vault)		otective vault)	Metal Vault (air right protective vault)			
Concrete Grave Liner (structural protection only)		tural protection only)	Wood Box (not accepted by some cemeteries)			
Cemetery Name:			Cemetery Location:			
The Cemetery Property is in the Name of:						
Miscellaneous Notes & Instructions:						

Please select one of the following:

Please send me information on funeral planning Please place my information on file Please contact me to schedule an appointment