

Testator

Name _____

Address _____

Executor(s)

Name(s) _____

Address _____

Telephone _____ (Res) _____ (Bus)

Email _____

To My Executor(s):

Following are my wishes with respect to funeral and burial/cremation arrangements. I understand that the final decision is your responsibility as executor(s); these wishes are meant to assist you in this process.

My preferred funeral provider is _____

Address/telephone of provider _____

I have made my own funeral arrangements Yes No

If yes, the funeral arrangements are prepaid Yes No

My preference is Burial Cremation Other (specify)

If burial, my preferred location for burial is _____

I have purchased a burial plot/crypt Yes No

If yes, name/location/plot #: _____

If cremated, my preferred location for cremains is buried columbarium niche other (specify)

I have purchased a burial plot/columbarium/crypt/niche Yes No

If yes, name/location/plot #: _____

Headstone/Memorial Marker Yes No Existing Other (specify)

I wish to have a funeral/memorial service Yes No

If yes, the following are my wishes with respect to:

Prayer Service (prior to funeral/memorial) _____

Viewing/open casket _____

Type of service (religious, spiritual, secular, etc.) _____

Location _____

Presider _____

Special participants (e.g. fraternal organizations) _____

Pallbearers (Name and Contact Information)

1. _____ 4. _____

2. _____ 5. _____

3. _____ 6. _____

Honourary Pallbearers (Name and Contact Information)

1. _____ 4. _____

2. _____ 5. _____

3. _____ 6. _____

Music _____

Readings _____

Eulogy _____

Social gathering _____

Private burial/disposal of cremains _____

Donations in lieu of floral tributes Yes No

If yes, please direct donations to _____

Other _____

I ask that my family respect my desires and cooperate with the Executor with respect to my wishes as stated above.

Testator's Signature: _____ Date: _____