

My Wishes

FUNERAL PLANNING

FREE Planning Pack



THE SEARSON FAMILY
FUNERAL SERVICE

*'We don't just arrange funerals, we create
meaningful days'™*

www.thesearsonfamily.co.uk

0800 022 3309



A GIFT OF LOVE

'My Wishes' lets you record all the essential information regarding your chosen funeral.

Arranging a funeral when someone has passed away can be very emotional and upsetting. Decisions you make are often clouded by emotion, and knowing what type of funeral to provide is usually based on the wishes left behind.

'My Wishes' helps alleviate some of those important decisions by putting you in control of your funeral. It allows decisions to be made rationally, unhurried and at a pace that suits you. This isn't something that needs to be completed now; you can come back to it, time after time until you are satisfied that it reflects the funeral you want.

Once completed, keep this book in a safe place, or pass it to a close relative or friend, someone who will be responsible for your funeral when the time comes. We can always provide additional copies for your Solicitor, Executor or other family members should you require them.

We hope you find this **'My Wishes'** Funeral Planner convenient and easy to complete. However, if you require any help, please do not hesitate in contacting us.

The Searson family



To my family and friends,

This folder contains all **'My Wishes'** regarding my chosen funeral. It contains all the relevant information you need, and I sincerely hope it alleviates some of the difficult and emotional decision you need to make.

Some of **'My Wishes'** may not prove financially viable, or you may want to include some of your own choices. Please be at ease to include additional options, as this is intended only in guiding you.

This folder contains a formal acknowledgement of **'My Wishes'** and hope it proves beneficial at a sad and difficult time.

Full Name:

Signed:

Dated:



MY DETAILS

SURNAME: FIRST NAME:

OTHER NAMES: KNOWN AS:

MAIDEN NAME: GENDER:

ADDRESS:

..... POST CODE:

DATE OF BIRTH: BIRTH PLACE:

RELIGION:

SPOUSE: RELATIONSHIP:

DATE OF MARRIAGE: PLACE:

MOTHER: DATE OF DEATH:

FATHER: DATE OF DEATH:

EXECUTOR / NEXT OF KIN:

ADDRESS:

..... POST CODE:

SOLICITOR: WILL: YES / NO

ADDRESS:

..... POST CODE:



MY SERVICE

SERVICE:

PLACE OF SERVICE:

IF CHURCH, ADDRESS:

..... POST CODE:

DENOMINATION: MINISTER:

SERVICE TYPE: RELIGIOUS / HUMANIST / CELEBRATIONAL / NO SERVICE

READINGS / POEMS:

.....

MUSIC:

AT START OF SERVICE:

DURING SERVICE:

AT END OF SERVICE:

HYMN: (1)

HYMN: (2)

HYMN: (3)

ADDITIONAL:

.....

.....

.....



MY CREMATION

NAME OF CREMATORIUM:

TYPE OF CREMATION: Family ONLY ☐ FAMILY & FRIENDS ☐ NO Mourners ☐

Tick Preference

CREMATED REMAINS

OPTION 1:

SCATTER AT CREMATORIUM: ANY WHERE IN GARDEN ☐ alternatively
Tick if no other option is requested

SCATTER AT: CREMATORIUM:
State Name / Town of preferred Crematorium

SAME LOCATION AS:

DATE OF DEATH: REFERENCE:

OPTION 2:

PRIVATE SCATTERING:

SCATTER MY REMAINS AT:

OPTION 3:

INTERMENT OF CREMATED REMAINS:

CEMETERY:

GRAVE OF: BURIED ON:

CEMETERY PLOT REFERENCE:

OPTION 4:

RETAIN CREMATED REMAINS:

REASON:



MY BURIAL

PLACE OF BURIAL:

TYPE OF BURIAL: Family ONLY ☐ FAMILY & FRIENDS ☐ NO Mourners ☐

Tick Preference

OPTION 1:

NEW GRAVE: ANY LOCATION IN CEMETERY ☐ PREFERRED LOCATION ☐

Tick Preference

PREFERRED LOCATION:

..... if possible

PURCHASE GRAVE ☐ COMMON (UNPURCHASED) GRAVE ☐

Tick Preference

OPTION 2:

EXISTING GRAVE:

NAME OF LAST INTERMENT:

DATE OF LAST INTERMENT:

PLOT REFERENCE:

EXISTING MEMORIAL: YES / NO

OWNER OF GRAVE:

ADDRESS:

..... POST CODE:



MY CARE

COFFIN:

COFFIN PREFERENCE: SIMPLE ☐ NO PREFERENCE ☐ FAMILY CHOICE ☐
Tick appropriate box

PLEASE DRESS ME IN:
.....

I PREFER A COFFIN GOWN: WHITE ☐ BLUE ☐ PINK ☐ CREAM ☐
Tick appropriate box

ITEMS TO BE PLACED WITH ME:
.....
.....

VIEWING:

I DO NOT WISH TO BE VIEWED ☐ CLOSE FAMILY ONLY TO VIEW ☐
ANYONE TO VIEW ☐

FLOWERS:

I WISH FOR FLOWERS ☐
NO FLOWERS PLEASE ☐

DONATIONS:

DONATIONS INSTEAD PLEASE ☐
State Charity

OTHER REQUESTS:
.....
.....



MY MEMORIAL

It is often the case that family, or friends, wish to provide a tangible reminder to a life lost, as a permanent memorial, or visible tribute. Traditional Headstone and Plaques can prove expensive. This is your opportunity to express your wishes in respect of this natural desire.

TRADITIONAL:

HEADSTONE: **MARBLE** ☐ **GRANITE** ☐ **SLATE** ☐ **OTHER:**
Tick preferred material

INSCRIPTION:
.....
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.....

ALTERNATIVE:

An alternative memorial can include a Flower Garden with Plaque in a family garden, a donation for a Bench, Rose Bush or Bird Bath at a Nursing Home, Church, family garden or public place:

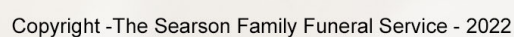
I WOULD LIKE:
.....
.....

LIVING:

It may be that you prefer your life to be honoured with another life. Planting a Tree or Bush is a practical way in which to keep a life lost visibly alive:

I WOULD LIKE:
.....



[illegible]

MY WORDS

This section is an optional inclusion, should you wish to provide a personal message at your funeral. A few words of reassurance, comfort and support, these words can be read by the officiating Minister or even a close relative or friend. Alternatively, provide suggested words for an obituary should this be your wish.

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SERVICE NOTES

This section is for any additional requests, comments or thoughts you may have regarding your funeral. This is a section that can include suggestions long after you have completed the programme, and these can be included in your formal file, just let us know and we'll update your records.

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SERVICE NOTES

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My Wishes

FUNERAL PLANNING



FUNERAL HOMES

HAVANT

25 - 29 Park Parade, Leigh Park,
Havant, Hampshire,
PO9 5AA

(023) 9247 7190

PORTSMOUTH

319 Copnor Road, Copnor,
Portsmouth, Hampshire,
PO3 5EG

(023) 9266 5795

SOUTHSEA

105 Winter Road, Southsea,
Portsmouth, Hampshire,
PO4 8DS

(023) 9273 8922



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