



Planning Your Memorial Service

Date _____

The information shared below will help the Minister plan a memorial service that reflects your personality, interests, and/or spirituality.

Name: (last, first, middle)

Home Address (street, city, zip)

Please identify at least one family member, partner, or friend who will be an initial point of contact for memorial arrangements (name, phone, relationship):

Memorial Service Suggestions

Hymns (prioritize 1-3): _____

Readings or Favorite Authors: _____

Special Song or Music: _____

Prayers, Meditations, or Blessings: _____

Memorial Gift Designation/s: _____

Other Requests: _____

Brief Autobiography

Please compile on a separate sheet of paper the following types of information:

- | | | |
|-----------------------------|--------------------------------------|-------------|
| Birth Date, Location | Home Towns | Graduations |
| Marriages, Unions, Divorces | Parents, Children | Pets |
| Careers or Jobs | Hobbies and Interests | |
| Honors and Awards | Personal or Professional Memberships | |

Briefly describe what is most important to you in your life and how you hope to be remembered.

During your life, when or how did you feel most inspired or spiritual?

What are your expectations about what happens in death?