

# **Funeral Pre-arranging**

## **Your Funeral Needs**

Person's name: \_\_\_\_\_

Address: \_\_\_\_\_

Religion (if any): \_\_\_\_\_ Minister / Celebrant

Burial ( ) Cremation ( )

Which Cemetery / Crematorium? \_\_\_\_\_

If burial, grave details: Lawn ( ) Monumental ( )

New grave ( ) Reopen of \_\_\_\_\_ grave

Date of last interment: \_\_\_\_\_

Venue of Funeral at Cemetery or Cremation only ( )

At Church and Procession to Cemetery or  
Crematorium ( )

Another Venue ( ) No Service required ( )

Memorial Service only ( )

Nominate specifics below:

\_\_\_\_\_

\_\_\_\_\_

Funeral type preferred: Full Service or No Service

Will a Newspaper Notice be needed: Yes / No

Name of Paper: \_\_\_\_\_

Flag / Post required: \_\_\_\_\_

Any Lodge, Association, Club, Union, etc. \_\_\_\_\_

Next of Kin: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

## **NOTES**

Place of Birth:

Date of Birth: \_\_\_\_\_

If born overseas, year arrived in Australia: \_\_\_\_\_ Occupation when working:

Person's spouse's name: \_\_\_\_\_ Spouse's maiden name \_\_\_\_\_

Age when married .....Place of marriage: \_\_\_\_\_

Is spouse deceased, where and when? \_\_\_\_\_

\_\_\_\_\_

If married more than once, same details needed for each marriage:

\_\_\_\_\_

\_\_\_\_\_

Children's names (by birth and adopted), date of birth (mark "D" if deceased):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Persons Father's full name: \_\_\_\_\_

His occupation when working: \_\_\_\_\_

Mother's full name: \_\_\_\_\_

Mother's maiden surname: \_\_\_\_\_

Her occupation when working: \_\_\_\_\_

We hope this form is of assistance to you. It contains everything that would be asked at a funeral arrangement interview. To have maximum value it should be posted back to

**Michael Hutchinson at 2/12 Dulacca St, Acacia Ridge 4110**

**or email to [contact@mhfunerals.com.au](mailto:contact@mhfunerals.com.au)**

**or Fax 3273 4588**

Or for more information

**Phone Central Number 3273 1399**