**Death Certificate Information**

Full Name of Deceased: …………………………………………………….…………………………………………………….

Date of Birth: …. /.... / ….

Town of Birth: …………………………………………………….…………………………………………………….

Country of Birth: …………………………………………………….…………………………………………………….

Father’s Name: …………………………………………………….…………………………………………………….

Father’s Town of origin: …………………………………………………….…………………………………………………….

Mother’s Name: …………………………………………………….…………………………………………………….

Mother’s Town of origin: …………………………………………………….…………………………………………………….

People to be notified and invited to the Funeral (Page …. of ….)

List of next of kin and friends: i.e. Husband/Wife/Son/Daughter/Mum/Dad/Brother/Sister/Nephew/Niece/Uncle/Aunt/Step/In-Law/Friend/Colleague etc

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Contact #i.e. 1 thru last | Full Name | Relationship to Benefactor  | Telephone Number | Email Address | Postal Address | Has a private Letter of Wishes | ContactedBy WhomOn Date |
| Example | Mr Fred Bloggs | Brother | +44 1234 5678 910 | fred.bloggs@gmail.com | 29 The Cuttings,Coleford,GloucestershireEngland | Yes / ~~No~~ | Who: …………………….When: … / … / … |
|  |  |  |  |  |  | Yes / No | Who: …………………….When: … / … / … |
|  |  |  |  |  |  | Yes / No | Who: …………………….When: … / … / … |
|  |  |  |  |  |  | Yes / No | Who: …………………….When: … / … / … |
|  |  |  |  |  |  | Yes / No | Who: …………………….When: … / … / … |
|  |  |  |  |  |  | Yes / No | Who: …………………….When: … / … / … |
|  |  |  |  |  |  | Yes / No | Who: …………………….When: … / … / … |

People to be contacted ***BUT NOT INVITED*** to the Funeral 1 of 1

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Order toContact | Full Name | Telephone Number | Email Address | Postal Address | ContactedBy WhomOn Date |
|  |  |  |  |  | Who: …………………….When: … / … / … |
|  |  |  |  |  | Who: …………………….When: … / … / … |
|  |  |  |  |  | Who: …………………….When: … / … / … |
|  |  |  |  |  | Who: …………………….When: … / … / … |
|  |  |  |  |  | Who: …………………….When: … / … / … |
|  |  |  |  |  | Who: …………………….When: … / … / … |
|  |  |  |  |  | Who: …………………….When: … / … / … |

**Funeral Wishes**

Funeral Director

Director Name : …………………………………………………….…………………………………………………….

Company Name: …………………………………………………….…………………………………………………….

Postal Address : …………………………………………………….…………………………………………………….

Phone Number: …………………………………………………….…………………………………………………….

E-Mail Address: …………………………………………………….…………………………………………………….

Coffin

Casket Type: …………………………………………………….…………………………………………………….

Casket Material: …………………………………………………….…………………………………………………….

Casket Colour: …………………………………………………….…………………………………………………….

Clothing

Outfit: (specific clothes i.e. blue suit/dress suit) …………………………………………………….…………………………………………………….

Significant Items: (ring/jewellery/watch etc) …………………………………………………….…………………………………………………….

Favourite Item: (golf club/soft toy etc) …………………………………………………….…………………………………………………….

Casket Open or Closed for viewing: Opened / Closed

Open casket only

* Is wedding ring to be removed before committal? …………………………………………………….…………………………………………………….

Funeral Ceremony

Pre-Service

Pre-Committal Service required? Yes / No

If yes only

* Postal Address (or Location) of Service: …………………………………………………….…………………………………………………….
* E-Mail Address: …………………………………………………….…………………………………………………….
* Phone Number: …………………………………………………….…………………………………………………….
* Service to be conducted by: …………………………………………………….…………………………………………………….

Service Music (to be played)

|  |  |  |  |
| --- | --- | --- | --- |
| When i.e. arrival/middle/departure | Group/Band/Singer | Song | Comments |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Service Song (to be sung)

|  |  |  |  |
| --- | --- | --- | --- |
| When i.e. arrival/middle/departure | Group/Band/Singer | Song | Comments |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Special Features

* Bag Pipes? Yes / No
* Releases? Doves / Balloons / Not Applicable
* Memorial Video? Yes / No

Funeral Ceremony (cont.)

Committal

Type of committal Burial / Cremation / Other (………………………………………………………………)

Postal Address (or Location) of Committal: …………………………………………………….…………………………………………………….

E-Mail Address: …………………………………………………….…………………………………………………….

Phone Number: …………………………………………………….…………………………………………………….

Committal to be conducted by: …………………………………………………….…………………………………………………….

Committal Music (to be played)

|  |  |  |  |
| --- | --- | --- | --- |
| When i.e. arrival/middle/committal/departure | Group/Band/Singer | Song | Comments |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Committal Song (to be sung)

|  |  |  |  |
| --- | --- | --- | --- |
| When i.e. arrival/middle/committal/departure | Group/Band/Singer | Song | Comments |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Burial only

* Cemetery Plot ID: …………………………………………………….…………………………………………………….

Cremation only

* Location for Ashes to be scattered at: …………………………………………………….…………………………………………………….

Special Features

* Bag Pipes? Yes / No
* Releases? Doves / Balloons / Not Applicable
* Memorial Video? Yes / No

Self-written obituary: Yes / No

(PLEASE COMPLETE BELOW)

|  |
| --- |
|  |

Picture for Obituary: Yes / No

(PLEASE ATTACH)