



*Pre-Arranging your own
Funeral Service*

Handley & Anderson
FUNERAL DIRECTORS

MY PERSONAL DETAILS

The following is the information required to register a death with Births, Deaths and Marriages to obtain a full death certificate.

Title Dr Mr Ms Miss Mrs Other _____

Full Name: _____

Known as: _____

Current Residential Address: _____

_____ Postcode: _____

Home Phone: _____ Mobile: _____

Date of Birth: _____

Place of Birth: *(Town/Suburb, State, Country)* _____

_____ If born overseas, year arrived in Australia _____

Occupation during working life: _____

Are you of Aboriginal or Torres Strait Islander Descent? Y N

Marital Details

Status:

Married Never Married Separated Divorced Widow

1st Marriage:

Place of Marriage: _____ Date of Marriage: _____

Full Name of Spouse *(Maiden Family Name)*: _____

2nd Marriage:

Place of Marriage: _____ Date of Marriage: _____

Full Name of Spouse *(Maiden Family Name)*: _____

Children: (Please state if deceased)

Full Names: _____ DOB: _____

Full Names: _____ DOB: _____

Full Names: _____ DOB: _____

Full Names: _____ DOB: _____

Full Names: _____ DOB: _____

Full Names: _____ DOB: _____

Full Names: _____ DOB: _____

Parent's Details:

Father's Full Name: _____ DOB _____

Occupation during working life: _____

Mother's Full Name: _____ DOB _____

Mother's Maiden Name: _____

Occupation during working life: _____

PERSON RESPONSIBLE AFTER MY DEATH

Full Name: _____

Residential Address: _____

_____ Postcode: _____

Phone Number(s): _____ Relationship: _____

My will is located at _____

Name of Executor _____

Centrelink /Veteran Affairs no: _____

MY FUNERAL SERVICE

I would like my Funeral Service to be held at

Church Chapel Graveside Other Venue

Name and address: _____

It is my wish to be: Buried Cremated at:

If Burial, is the grave to be:

New Grave Reopen of existing Grave Reserved Grave

If new grave, Lawn or Monumental Section

Please provide details:

If Cremation, are there any specific instructions as to where you would like your ashes to be interred or scattered at:

My Funeral Service is to be conducted by

Minister of Clergy/Priest Celebrant - Name: _____

If Clergy, state denomination: _____

Family to decide on coffin bearers OR please ask these people below

1. _____ 2. _____
3. _____ 4. _____
5. _____ 6. _____

Newspaper Notices

I would like a Death and Funeral notice placed in

- | | |
|--|--|
| <input type="checkbox"/> The Herald Sun | <input type="checkbox"/> The Sentinel Times |
| <input type="checkbox"/> The Age | <input type="checkbox"/> Phillip Island Advertiser |
| <input type="checkbox"/> Leongatha Star | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Social Media - eg. Facebook, Handley and Anderson webpage | |
| <input type="checkbox"/> Private Funeral - No notices required _____ | |

Floral Tribute

I would like the flowers on my coffin to be: *(colour/variety of flowers)*

Is there any specific clothing/jewellery you wish to be laid to rest in?

Coffin/Casket Selection:

Music Selection

I would like:

- CD Music Organist Piper Other _____
(Name of songs and artist, hymns and artist)

Entry Song: _____

Reflection Song/Hymns: _____

Exit Song: _____

Cemetery Song (if applicable): _____

Additional Requests

In Lieu of flowers donations to _____

Refreshments to be held at _____

	<i>Yes</i>	<i>No</i>	<i>Family to decide</i>
Viewings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Framed Photo on coffin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DVD Photo Presentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Order of Service Booklets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Keepsake Bookmarks/cards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RSL or Masonic Service <i>(if eligible)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I have selected the photo I would like on my booklet / coffin

I would like the following poem/reading at my Funeral Service

Other Special requests

Any additional thoughts and information

*To assist family with eulogy, we strongly suggest you provide them with some of the following information:
Details of your parents, siblings, where you grew up, where you went to school, places you have lived, places worked, life accomplishments, club / community involvements, grandchildren, post retirement activities eg. travel, hobbies and sports*

Is this booklet being completed with a Handley & Anderson Pre-Paid Funeral Plan?

Yes No _____

This booklet is to assist my family in preparing for my funeral service,

I provide permission for my family to make any changes

OR

My preference is for **NO CHANGES** allowed to be made

Signature _____ Date _____

Once you have completed this Pre-Arranged Funeral Booklet please return to Handley and Anderson Funeral Directors.

A copy will be kept at our office and the original will be returned to you for your families records.

Handley & Anderson
FUNERAL DIRECTORS

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