

# *Preplanning Worksheet*

This worksheet will help you outline some of the specific details in your final arrangements.

*There are four important steps to ensuring your final arrangements are carried out according to your wishes.*

1. **Reflect**—Take time to consider your desires and options for your final arrangements. This includes taking time to reflect on your passions, beliefs and how you see yourself. You have probably already used the ShareYourWishes.org Reflection Journal to complete this process. If not, try it out before moving on to this worksheet.
2. **Record**—Record your final wishes in a formal document and keep it in a secure place. This worksheet is a basic way you can do this. For more detailed final arrangements, consult with a planning counselor at your local funeral provider.
3. **Share**—Share your wishes with loved ones and your estate planner or attorney to make sure they understand what you want. Provide them with a copy of your preplanning document or make sure they know where to locate it.
4. **Support**—The best way to ensure your final arrangements are carried out as you've planned is to support them financially. Think about ways you can provide this support for your final plans.

Name: \_\_\_\_\_

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

## *Section 1: Burial/Cremation Preference*

I prefer:

Burial     Cremation

If I prefer cremation, my preference for the timing of cremation is:

Before a Visitation / Funeral Service     After a Visitation / Funeral Service

If my preference is cremation before a visitation / funeral service, my preference regarding my cremated remains is:

Present at Service     Not Present at Service

If my preference is cremation after a visitation / funeral service, my preference regarding my body is:

Present at Service     Not Present at Service

If my body is to be present at a visitation / funeral service, regardless of whether my preference is burial or cremation, my preference regarding casket is:

Open During Service     Closed During Service

## Section 2: Funeral Service

The following is an expression of my funeral service decisions.

### Funeral Home / Mortuary Preferred: (Name, Address, Phone)

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#### Place of Service:

Funeral Home / Mortuary       Church: \_\_\_\_\_

Chapel at Cemetery       Graveside

Other: \_\_\_\_\_

Religious Preference: \_\_\_\_\_

Preferred Celebrant / Clergyman: \_\_\_\_\_

Participating Organizations: (military, fraternal etc.):

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Type of Casket:       Wood       Metal

Cremation Coffin       Other:

Flag:     Folded     Draped     No Flag Presented to: \_\_\_\_\_

Clothing Preference (description, colors, from current wardrobe, new, etc.):

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#### Personal Accessories:

Wedding Band     Stays On or     Return to: \_\_\_\_\_

Eyeglasses       Stay On or       Return to: \_\_\_\_\_

Watch               Stays On or       Return to: \_\_\_\_\_

Other: \_\_\_\_\_     Stays On or     Return to: \_\_\_\_\_

Other: \_\_\_\_\_     Stays On or     Return to: \_\_\_\_\_

Floral Preferences (type, color or arrangement preferred):

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Wake / Visitation:     Yes     No     Public     Private

Location:

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Musical Selections:

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**Preferred Musicians:**

Organist:

Soloist:

Pianist:

Bugler:

Other:

**Religious, Spiritual or Other Readings** *(indicate passages, titles, authors as appropriate):*

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**Eulogy Delivered By:**

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**Notations for Eulogy:**

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**Newspaper Notices:** *(indicate names, cities of papers):*

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**Pallbearers:**     Yes     No

Name: \_\_\_\_\_ NAME: \_\_\_\_\_

Name: \_\_\_\_\_ NAME: \_\_\_\_\_

Name: \_\_\_\_\_ NAME: \_\_\_\_\_

**Memorial Donations:**     Yes     No

Donations to:

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## Section 3: Cemetery Service

### Cemetery Preferred:

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### **Interment Information:** (Scattering of ashes not permitted in Newton, NH cemeteries)

#### Burial Options:

Ground Burial

#### Cremation Options:

Ground Burial

Scattering Location:

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#### Cemetery Plot:

Cemetery Plot Already Purchased

Cemetery Plot Not Purchased

Details, if already purchased:

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**Cremation Urns:**  Urn       Keepsake Urn       Scattering Urn

Description:

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#### **Headstone:**

Upright Monument

Flat Marker

Cremation Memorial Plaque

Other:

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**Inscription:** (*indicate desired text, emblems, etc.*):

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#### **Additional Instructions:**

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