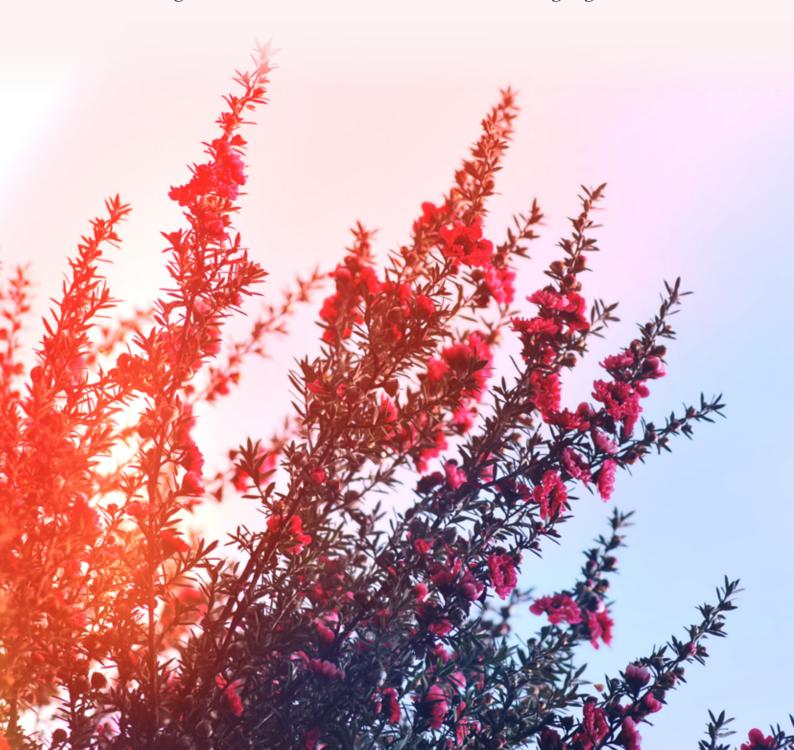


## My Wishes

for remembrance and celebration of life



# Planning Ahead for My Family

I have completed this booklet for you, my family.

I wanted to take that extra burden away from you on my time of passing.

This booklet has been completed with love, thought and all my heart.

You will find practical information inside as well as how I want to be remembered together with my wishes.

This is for you.

## MyWishes

I have penned my desired wishes in this booklet to help you in the choices you have to make. What's inside this booklet describes how I want to be remembered, how I would like my life to be celebrated.

Although at the time you read this you will be sad, I also want you to laugh and remember the good times.

With all my Love

Always caring for the community in all its diversity.



#### FOR MY FAMILY

#### My Personal Details

Title: Or OMr OMs OMiss Other
Surname:
Surname:
Given Names/s:
Sex: OM OF
Date of Birth:
Place of Birth:
If born overseas, date of arrival in Australia:
Aboriginal or Torres Strait Islander Origin:
Usual Residence:
Contact Information
Home:
Work:
Mobile:
Email:
Profession or occupation during working life:



## My Preferred Funeral Director Name: \_ My Next of Kin Name: \_ Address: \_\_\_ My Will is located at Name: \_\_\_\_\_ Date of Will: My Solicitor Name: \_ Executor of my Will Name: \_\_

### I am an Organ Donor

( Yes	$\bigcirc$ No	Reference number:

#### My Personal Documents

•	
Birth Certificate Location:	
Marriage Certificate Location:	
Medicare Card number:	
Centrelink Pension Number:	
Veterans Affairs Number:	
Passport number:	
Cititzenship:	
Drivers Licence Number:	State of Issue:



## My Family Details

Father'	's Name:		
	occupation:		
	r's maiden name:		
	occupation:		
		_	
Marita	I Status: Married Widow/er Divorced Nev	ver married (	Separated
My Sp	pouse or Partner's name		
Spouse	e/Partner name:		
Usual C	Occupation:		
Place o	of Marriage:		
My age	e at time of Marriage:		
My C	hildren		
1.	Child's name:		
	DOB:	_ Female	Male
2.	Child's name:		
	DOB:	_ Female	Male
3.	Child's name:		
	DOB:	_	Male
4.	Child's name:		
	DOB:	_	Male
5.	Child's name:		<u></u>
J.			Mala
	DOB:	_	( ) Male



#### My Financial Information

#### Bank account details

Bank Name:	
Account number:	BSB:
Location of documents:	
Income Tax Records	
Tax File Number:	
Location of Records:	
Deeds of Property	
Property address(es):	
Mortgage details	
Location of Records:	
Lender reference number:	
Address of lender:	
Life insurance policies	
Location of Records:	
Superannuation	
Details:	
Stocks and shares	
Location of Records:	



Accountant		
Name:		
Phone:		
Address:		
Car Details		
Registration Details:		State:
Location of documents:		
Military Information		
Branch of Service:		
Service Serial Number:		
Date Entered Service:	Place:	
Date of Discharge:	Place:	
Grade, rank or rating:		
Wars/Conflicts served:		
Societies/Clubs		
Memberships and positions held:		



My Medical History	
My Funeral Service or Celebration of Life	
These are my wishes	
Do you have a pre-paid funeral Yes No	
If so, who with:	
Mood of Service: Formal Informal	
Do you wish to be O Buried or Cremated?	
Preferred Cemetery or Crematorium	
Celebrant/Clergy:	
Religious Denomination:	
Veteran service by:	
Eulogy by:	
Donations to:	
Music selections:	



Type of coffin/casket desired: Coffin Casket
Special verses/readings:
I would like a funeral notice:  Yes  No
If so, to be placed in which paper?
O I would like my funeral to be private and therefore no funeral notice to be placed.
Flowers/Donations
No flowers by request:
In lieu of flowers, I would prefer people make a donation to the following charity:
I would like the flowers in my floral tribute to include:
Clothing
My preference for my final garments are as follows:
Special Instructions
We suggest that you use this section to voice any special instructions and keep your instructions current. We recommend that you date these instructions to avoid possible confusion later.

#### My Resting Place

A beautiful memorial ensures you are forever remembered and respectfully honoured. Having a memorial keeps your memory alive for future generations.

#### Memorialisation

Do you have an existing family connection with one of our cemeteries?		
Do you own a site at one of our cemeteries?		
If yes, location of site:		
If yes, whose name is the property registered?		
I Own/Prefer Burial: Crypt Grave		
Cremation:		
I wish part of my ashes to be scattered at (site location):		
Remainder placed?		
Plaque wording		
I would like the following wording on my plaque/headstone:		



### People to notify for me

in the event of my passing, I wish the following people to be notified:
Name:
Relationship:
Phone number:
Name:
Relationship:
Phone number:
Thore number.
Name:
Relationship:
Phone number:
Friorie flumber.
Name:
Relationship:
Phone number:
Phone number:
Sharing my story
Your life story is so important, and you should start by sharing it with your family and close friends.
This can be a difficult conversation to start but so rewarding once you've taken the first step. Some
things to help you get started:
Where I grew up:



Vhere I went to school:
arliest memories:
avourite times:
obbies and special interests:
Nost important people in my life:



Places I've worked:
The control of the co
Greatest achievements:
Something most people don't know about me:
Acknowledgments I would like at my funeral:
Items to be on display at my funeral:

#### My Life. My Story

Signature: _		
O		

Date: \_



#### Macquarie Park North Ryde

Frenchs Forest
Davidson

Field of Mars Ryde

> Sandgate Newcastle

Gore Hill St Leonards

#### Northern Cemeteries

Corner Delhi and Plassey Roads, North Ryde NSW 2113
Phone: 1300 389 888 Email: info@nmclm.com.au

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