

## Information & Instructions Concerning My Death/Funeral/Memorial

### ***For Members of St. John's Episcopal Church and Diocesan Mission Center Olympia, Washington***

As stated in the Book of Common Prayer, "The liturgy of the dead is an Easter Liturgy" which finds its meaning in the Resurrection of our Lord. From the earliest times the church has looked on Christian funerals as anniversaries of the departed member's "birthday in eternity." A Christian funeral or memorial service proclaims hope in the face of death; it is an affirmation of the continuity of fellowship with God even after our temporal lives are ended.

"This joy, however, does not make our human grief unchristian," says the Prayer Book. It is natural and healthy to grieve the loss of a loved one. Jesus Himself cried at the grave of his friend, Lazarus. So, while we rejoice that the one we love has entered into the Larger Life, we also grieve at the separation caused by death.

This form is meant only as a guide to help your survivors attend to the matters concerning your death/funeral/memorial. This is meant to help answer the question, "What would he/she have wanted?" This form should be kept where it will be readily available in case of need, and, if appropriate, photocopies sent to your next of kin. Additional sheets may be added to complete this information (e.g. insurance policies, a copy of your will, etc.). Omit the items that do not apply and/or choices you prefer to leave to the judgment of your next of kin or clergy. To know your wishes in these matters will help your survivors immeasurably at what is usually a very difficult time.

Also, in your planning, it is our hope that you will give some serious thought to "planned giving" and remembering St. John's in your will as an important way of continuing to support the mission and ministry of St. John's Church.

FULL NAME \_\_\_\_\_ DATE \_\_\_\_\_

RESIDENCE \_\_\_\_\_  
(address) (city) (state) (zip code)

RESIDENT IN THIS LOCATION SINCE \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

NEXT OF KIN (name, address, phone) \_\_\_\_\_

BEYOND THE OBVIOUS PEOPLE, PLEASE MAKE SURE THESE ARE INFORMED WHEN I DIE:

NAME	ADDRESS/PHONE	RELATIONSHIP
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

THIS PERSON HAS AGREED TO HELP IN MAKING THE ARRANGEMENTS AFTER MY DEATH TO COMPLY WITH MY WISHES AS MUCH AS POSSIBLE:

\_\_\_\_\_

(name)

(address)

(phone)

I HAVE/HAVE NOT MADE A WILL. IT CAN BE FOUND \_\_\_\_\_

MY ATTORNEY \_\_\_\_\_  
(name) (address) (phone)

The Personal Representative of my Estate \_\_\_\_\_  
(name) (address) (phone)

<b>Data for Death Certificate (accuracy is very important)</b>		
Marital Status: Never Married ___ Separated ___ Widowed ___ Married ___ Divorced ___		
Spouse/Partner _____ (name) (address) (phone)		
Social Security Number _____		
Father's Full Name _____		
Mother's Maiden Name _____		
Served in U.S. Armed Forces: Yes ___ No ___ Branch _____		
Dates Served _____		Service Serial Number _____
Rank/rating _____		Unit At Time of Discharge _____
(If you desire a military burial, attach a copy of your Discharge Record and specify your wishes later in this form)		

**FUNERAL HOME ARRANGEMENTS**

Funeral Home \_\_\_\_\_ Phone \_\_\_\_\_

Pre-arrangements Made: Yes \_\_\_ No \_\_\_ (If "yes," attach copy of agreement)

Write on the back of this page. Attach a separate sheet with information which might be helpful in writing a newspaper death notice. Suggestion include: time lived in community, occupation, employers, organizations of which you are a member, schools attended, degrees received, military service, church affiliation, etc. Don't be bashful; it will be a big help to your survivors.

I PREFER: Bequeathal \_\_\_ Cremation \_\_\_ Burial \_\_\_

**BEQUEATHAL**

I have made specific arrangements for medical research and/or organ donations.

Donation agreements are: Attached \_\_\_ Filed \_\_\_ (location) \_\_\_\_\_  
(Remember, by the time your family reads this, it will be too late to remove any organs you wish to donate. If you choose bequeathal, make sure your wishes are known by the people closest to you.)

**CREMATION**

I (Do / Do Not) want my body present for a funeral service before it is cremated.

I (Do / Do Not) want the ashes present in an appropriate container (urn) at the funeral service.

What I would like done with my ashes: \_\_\_\_\_



Bible passages suggested by the church are found on p. 495, Book of Common Prayer

Old Testament \_\_\_\_\_

Psalm \_\_\_\_\_

New Testament \_\_\_\_\_

Gospel \_\_\_\_\_

OTHER INSTRUCTIONS REGARDING MY DEATH AND FUNERAL OR MEMORIAL

This death/funeral/memorial plan has been filed with the following:

PARISH CHURCH: \_\_\_\_\_

PARISHIONER: \_\_\_\_\_

Personal Representative/RELATIVE: \_\_\_\_\_

(Revised 07/01/2008, filed under "Death Funeral Memorial Instructions Form")