

Parkside

F U N E R A L S

PLANNING AHEAD



Personal Details



PARKSIDE FUNERALS

Is this booklet being completed together with a
Parkside Funerals Pre-Paid Funeral Bond?

☐ Yes

☐ No

Title: ☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other: _____

Surname: _____

Surname at Birth: _____

Given Name(s): _____

Gender: ☐ Male ☐ Female ☐ Non-Binary ☐ Other: _____

Date of Birth: _____

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

If born overseas, date of arrival in Australia: _____

Usual Residence (Suburb, State, Postcode, Country): _____

Home Number: _____

Mobile Number: _____

Email Address: _____

I identify as Aboriginal or Torres Strait Islander origin:

☐

No

☐

Yes, Aboriginal

☐

Yes, Torres Strait

☐

Both

Usual occupation during working life:

I am retired:

☐

Yes

☐

No

I am registered in the UTAS Body Bequest Program:

☐

No

☐

Yes

Reference:

Name of responsible person following my death:

Address (Suburb, State/Territory, Postcode):

Phone Number:

This person is my Executor:

☐

Yes

☐

No

If not, name of Executor:

Address (Suburb, State/Territory, Postcode):

Phone Number:

My Will is held with (Solicitor's details):



My Family



PARKSIDE FUNERALS

Relationship Status:

- ☐ Married ☐ Widow/er ☐ De-Facto Relationship
☐ Divorced ☐ Never Married

Marriage/Relationship 1

Given Name(s) of Partner:

Surname of Partner (at birth):

- ☐ Male ☐ Female

Place of Marriage (Suburb, State, Country):

Date of Marriage:

Marriage/Relationship 2

Given Name(s) of Partner:

Surname of Partner (at birth):

- ☐ Male ☐ Female

Place of Marriage (Suburb, State, Country):

Date of Marriage:

Marriage/Relationship 3

Given Name(s) of Partner:

Surname of Partner (at birth):

- ☐ Male ☐ Female

Place of Marriage (Suburb, State, Country):

Date of Marriage:

Children

1. Given Name(s):

DoB:

Adopted:

Deceased:

2. Given Name(s):

DoB:

Adopted:

Deceased:

3. Given Name(s):

DoB:

Adopted:

Deceased:

4. Given Name(s):

DoB:

Adopted:

Deceased:

5. Given Name(s):

DoB:

Adopted:

Deceased:

6. Given Name(s):

DoB:

Adopted:

Deceased:

7. Given Name(s):

DoB:

Adopted:

Deceased:

8. Given Name(s):

DoB:

Adopted:

Deceased:

Parents

Father/Parent's name:

Mother/Parent's surname:

Mother/Parent's maiden name:

Mother/Parent's given name(s):



My Wishes



PARKSIDE FUNERALS

My Funeral Service

I would like my Funeral Service to be held at (chapel, church, venue):

Address:

Phone Number:

I wish to be: ☐ Cremated ☐ Buried

Cemetery:

I am to be buried on my own: ☐ Yes ☐ No

I am to be buried with: **DoD:**

I have a reservation: ☐ Yes ☐ No

If yes, details:

My wishes for my cremated remains are:

I would like my Funeral Service led by:

☐ Celebrant ☐ Clergy ☐ Family/Friend

Name and Phone Number:

Coffin/Casket Selection:

I would like these people to carry my coffin/casket:

Newspaper Notices

I would like a Death Notice placed in:

☐ The Advocate ☐ The Examiner ☐ The Mercury

☐ Other (please specify): _____

I would like a Funeral Notice placed in:

☐ The Advocate ☐ The Examiner ☐ The Mercury

☐ Other (please specify): _____

☐ **I would like a private Funeral and no Press Notices to be placed.**

Flowers

No Flowers by request: ☐ Yes ☐ No

In lieu of flowers, I would prefer donations to the following charity:

I would like the flowers in my coffin/casket arrangement to include (colour/variety):

Clothing and Preparation

I wish to be dressed in:

I prefer to be clean shaven: ☐ Yes ☐ No

Jewellery: ☐ Stay on ☐ Remove and return to Next of Kin

Other jewellery/special requests:

Board/Exec	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to de
Lighting	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to de
ments	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to de

special requests:

☐

Family to decide

Other special requests:

PARKSIDE
 FUNERALS

Musical Preferences

I would like:

- | | | |
|---|--|---|
| <input type="checkbox"/> Recorded Music | <input type="checkbox"/> Live Musician | <input type="checkbox"/> Organist/Pianist |
| <input type="checkbox"/> Vocalist | <input type="checkbox"/> Piper | <input type="checkbox"/> Other (specify): |

Music Choices

Gathering:

Entrance:

Musical Reflection:

Photo Presentation:

Placement of Flowers:

Leaving:

Walking to Graveside:

Committal:

Other:

Funeral Service Content

I present the below information to assist those preparing my eulogy/tributes.

Where I grew up:

Some of my earliest memories:

The best time I ever had:

Hobbies/Special interests:

The most important people in my life:

Where I worked:

My accomplishments:

My proudest moments:

Something most people don't know about me:

Clubs/Community groups:

- ☐ RSL ☐ Bowls/Golf/Tennis clubs ☐ Lions ☐ Rotary
☐ Other (please specify):

Please acknowledge the following people/organisations at my funeral:

I would like the following displayed at my funeral:

- ☐ Medals ☐ Art/Craft work ☐ Photos
☐ Sporting items ☐ Other (please specify):

I would like the following read at my funeral (poem/letter etc):

Any additional thoughts/information:

The information in this booklet is to assist my family and others with the preparation of my funeral service.

☐ I grant permission for my Nominated Responsible Person/Executor to make changes.

☐ These arrangements are to remain unchanged.

Signature:

Date:

On completion of this **Planning Ahead** booklet, please send the original copy to:

Parkside Funerals

PO Box 1025

Burnie TAS 7320

Or bring it to our offices:

254 East Cam Road

Burnie TAS 7320

(email info@parksidefunerals.com.au if completed online)

We will enter your details and requests into our Pre-Arranged Funerals database. Once completed, we will forward you the original and an additional copy in the mail, together with a comprehensive quote at today's prices, and suggest that you keep a copy with your other important documents.

The second copy may be given to your Next of Kin, or whoever will be responsible for finalising your funeral arrangements.

For any further information, or if you would like to go ahead with a Pre-Paid Funeral Bond, please call our office on

(03) 6433 4010.



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