



Pre Planning
~
Your Final
Arrangements



Town of Harwich
Cemetery Department
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Harwich, MA 02645
508-430-7549
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Pre Planning Your Final Arrangement

Personally prepared by: _____

Dear family and friends,

This is an outline of my final wishes and additional information that will be helpful in completing any necessary forms. It is my hope that this information provides comfort and guidance with making final arrangements and, rather than be burdened with so many decisions, you will be free to remember the happy years we shared together.

Love,

Sign: _____

Date: _____

Witness: _____

Important notice to preparer:

This booklet should be readily available to your family and friends at all times. It is strongly recommended that you involve your family and notify them of the location of this book. Do not keep in a safety deposit box or with a will since it may not be found until after the services have taken place.

SERVICE PREFERENCES

Today there are unlimited options with planning funeral and memorial services. The services can be designed to be as special and unique as the individual. When planning services, we suggest that you use this section as a guideline for your loved ones. Since the service is primarily for the benefit of the survivors, it is important to consider the needs of your family. Your family may also find healing with being involved in planning some of the details of the service.

Person likely to be in charge of the final arrangements:

Name: _____

Phone: _____ Relation: _____

Visitation/Gathering (For both earth burial and cremation services)

I would like a visitation with public viewing.

I would like a visitation with no viewing.

(Closed casket or urn present)

Visitation to be held at: funeral home church other location

I prefer to have a private, family only viewing.

I do not want a visitation or viewing.

Service (For both earth burial and cremation services)

Service to be held at: _____

Clergy/Officiant: _____

Readings: _____

Music/Songs: _____

Soloist: _____

Organist/Pianist: _____

Pallbearers/Honorary Pallbearers: _____

DISPOSITION

[] Earth Burial (with casket)

Name of Cemetery: _____

Location of Cemetery: _____

Is the grave already owned? [] Yes [] No

If yes, please provide any possible details such as the section, lot number or family plot the grave is in:

[] Cremation

I prefer to have my ashes:

[] Buried in _____ Cemetery

Cemetery location: _____

Is the grave already owned? [] Yes [] No

If yes, please provide any possible details such as the section, lot number or family plot the grave is in:

VITAL STATISTICS

Full Legal Name: First _____

Middle _____ Last _____

Maiden Name _____

Marital Status: Married Divorced Widowed Never Married

Spouse's Name _____

If wife, specify her maiden name _____

Current Address: Street _____

City _____ Zip _____

State _____ County _____

Date of Birth: _____

Place of Birth: _____

Social Security Number: _____

Years of Primary/Secondary Education: (0-12) _____

Years of College: _____ **Degree:** _____

U.S. Veteran? Yes No

If yes, which branch of service: _____

Serial No: _____ Rank: _____

Date of Entry: _____ Discharge Date: _____

(You may want to keep a copy of the discharge paper with this booklet)

Parents' Names: Father _____

Father's Place of Birth _____

Mother _____

Mother's Maiden Name _____

Mother's Place of Birth _____

Your Occupation: _____

Which type of business or industry did you work?

Children and their locations of residence:

Brothers and Sisters and their location of residence:

Number of grandchildren: _____

Number of great-grandchildren: _____

BACKGROUND

Where did you grow up?

Which schools did you attend?

Graduation date(s) & certificates/degrees earned:

If married, where did you get married? _____

Marriage date: _____

Religious, fraternal and charitable organizations you belong to:

Achievements: (Personal and/or professional):

Hobbies:

Additional Background Information:

Newspapers to place obituary in:
