

Your Funeral Wishes A Planning Guide- Pg 1

Funeral Requests

In the event of my death, the following can be used as a guide for my funeral and burial arrangements.

Funeral Home:		
Address:		
Phone Number(s)	:):	
Email Address:		

I have a living will	Yes	No
l am an organ donor	Yes	No
Organs for donation:	Yes	No

Type of funeral/memorial:

- Traditional funeral service in my place of worship
- _____Traditional funeral at a funeral home
- _____Traditional wake/shiva/visitation
- _____Celebration of life NOT at a funeral home or place of worship
- _____A service while I'm still alive so I can see everyone I care about
- ____No preference
- _____Other (volunteer event, vacation, etc):______

Location of service (if applicable): _____

Ohio State University



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I wish for my body to be:	
CrematedHave a traditional burialGreen	Donated
Complete the following based on your wishes above:	
Burial Information:	
Cemetery Name:	
Address:	
Phone Number(s):	
Plot Number:	
Cremation:	
My ashes should be buried at:	
My ashes to be scattered at:	
My ashes should be given to:	
I do not have a preference	

Green Burial

Provide specific information on the type and assisting organization:

Donated

Provide specific information on the type and assisting organization:



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I have funeral insurance/	'burial expense	coverage:	Yes	No	
I have pre-paid for the fo	ollowing expens	ses:			
Cremation	Yes	No			
Burial Costs —	—Yes —	– No			
Burial Plot	Yes	_No			
Casket	Yes	_No			
Gravestone	Yes	_No			
Additional information a		·			
I have the following requ Music:	-				
Scriptures or specific read	dings:				
Minister/Rabbi to perforn	n service:				
Person to give eulogy:					
Calling hours:					
Person(s) to be buried ne	xt to:				



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I wish the following persons to be pallbearers: _____

Other special personal, family, cultural, or religious traditions that should be honored:

In lieu of flowers, please ask for donations to: _____

I am a member of the following religious denominations/groups:

I am a member of the following fraternal organizations:

Please write any additional special instructions: