

# Forsey and Son

ESTABLISHED 1946

INDEPENDENT FAMILY FUNERAL DIRECTORS  
MEMORIAL MASONS

## LAST WISHES / FUNERAL INSTRUCTIONS

### Instructions for Completion

- This form has been designed for one person to complete
- Enter as much or as little information as you wish
- Once complete, please return the form to us; we will securely retain a photocopy and return the original to you and also provide you with a photocopy for your next of kin/executor
- Please ask if you require additional copies
- Please be assured all the above information will be held in the strictest of confidence
- Please ask if you require additional copies

### **Personal Details**

My Full Name \_\_\_\_\_

My Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

My Date of Birth \_\_\_\_\_

My Maiden Name (if applicable) \_\_\_\_\_

My Next of Kin (name and address) \_\_\_\_\_

My Doctor (name and address) \_\_\_\_\_

My latest Will is to be found at \_\_\_\_\_

The Executors (name and address) named in my Will are \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Forsey and Son

ESTABLISHED 1946

INDEPENDENT FAMILY FUNERAL DIRECTORS  
MEMORIAL MASONS

## My Preferred Funeral Director

Forsey and Son branch:  Glastonbury  Butleigh  Somerton

## Arrangements

My religion is \_\_\_\_\_

Where is the service to be held (i.e. church, crematorium chapel, chapel, graveside, etc)?

\_\_\_\_\_

Is the service to be before or after the burial/cremation?  before  after

My preferred person(s) to take the service (i.e. priest, vicar, minister, other):-

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone number \_\_\_\_\_

Are any of the services to be private / family only?  yes  no

If yes, state which \_\_\_\_\_

Do you wish service sheets to be printed for the main service?  yes  no

# Forsey and Son

ESTABLISHED 1946

INDEPENDENT FAMILY FUNERAL DIRECTORS  
MEMORIAL MASONS

*Do you have any specific directions about the ceremony, e.g. hymns; readings; directions regarding jewellery or dress; cortege to travel from?*

---

---

---

---

---

---

---

---

---

---

Are there to be family flowers only?       yes       no

If, instead of flowers, you would prefer a charity to benefit, please indicate your chosen charity

---

Newspapers in which the announcement should be made \_\_\_\_\_

---

Any Professional Associations, Clubs, etc to be informed \_\_\_\_\_

---

# Forsey and Son

ESTABLISHED 1946

INDEPENDENT FAMILY FUNERAL DIRECTORS  
MEMORIAL MASONS

## Cremation

*If you wish to be cremated please complete this page.*

*If you wish to be buried please complete the following page.*

I wish to be cremated:-

- at Mendip Crematorium
- at Yeovil Crematorium
- at Taunton Crematorium
- at Bath Crematorium
- other, please state \_\_\_\_\_

I wish my cremated remains to be:-

- loosely interred in the Garden of Rest at the Crematorium
- loosely interred at the Crematorium in the same location as the late \_\_\_\_\_  
\_\_\_\_\_ who died \_\_\_\_\_ (date)
- scattered by family, as arranged
- interred in a new grave in the Garden of Rest at \_\_\_\_\_  
Churchyard or \_\_\_\_\_ Cemetery
- interred in the existing grave of the late \_\_\_\_\_  
at \_\_\_\_\_ Churchyard or \_\_\_\_\_ Cemetery
- disposed of by other means, please state \_\_\_\_\_

Any instructions about memorials? \_\_\_\_\_

---

# Forsey and Son

ESTABLISHED 1946

INDEPENDENT FAMILY FUNERAL DIRECTORS  
MEMORIAL MASONS

## Burial

*If you wish to be buried please complete this page.*

*If you wish to be cremated please complete the preceding page.*

I wish to be buried:-

- at \_\_\_\_\_ Churchyard
- at \_\_\_\_\_ Cemetery
- other, please state \_\_\_\_\_

I wish to be buried:-

- in a new double depth grave
- in a new single depth grave
- in the existing grave of the late \_\_\_\_\_  
\_\_\_\_\_ who died \_\_\_\_\_ (date)
- I have previously purchased a grave and hold a Grant of Exclusive Right of Burial issued by  
\_\_\_\_\_ Council in respect of Grave Number \_\_\_\_\_  
Section \_\_\_\_\_
- I have a Faculty (in respect of a Churchyard) issued by \_\_\_\_\_

Any instructions about memorials? \_\_\_\_\_

---

# Forsey and Son

ESTABLISHED 1946

INDEPENDENT FAMILY FUNERAL DIRECTORS  
MEMORIAL MASONS

## Documentation whereabouts

*For security reasons, you may prefer to complete the following section only on the next of kin/ executor's copy of your wishes. We will be sending you a copy for this purpose in due course.*

You will find the following documents in the places listed below (if applicable)

Birth Certificate \_\_\_\_\_

Marriage Certificate \_\_\_\_\_

Original Enduring Power of Attorney \_\_\_\_\_

Insurance Policies \_\_\_\_\_

Pension Documents \_\_\_\_\_

Grave Deed \_\_\_\_\_

This Deed should pass to the following on my death \_\_\_\_\_

Funeral Payment Plan Policy \_\_\_\_\_

# Forsey and Son

ESTABLISHED 1946

INDEPENDENT FAMILY FUNERAL DIRECTORS  
MEMORIAL MASONS

## Other Instructions

*The following details will be required by whoever registers your death.*

Date of Birth \_\_\_\_\_

Place of Birth \_\_\_\_\_

Occupation \_\_\_\_\_

Maiden name (if applicable) \_\_\_\_\_

Full name and occupation of spouse/last spouse (if applicable) \_\_\_\_\_

Details of any state benefit being claimed at time of death \_\_\_\_\_

## General

You may wish to allow your family/executors the option to change or adjust some or any of the above details at the time of need, should they wish. Please indicate what wishes they are able to change.

None at all.

Any they so desire.

Any except the following: Burial/Cremation, Choice of hymns, place of interment/scattering  
Please delete as applicable and state below any other items they should not change \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signed \_\_\_\_\_

Dated \_\_\_\_\_