

TOBIN BROTHERS FUNERALS

Celebrating Lives SINCE 1934



Statement of Wishes
For the Celebration of my Life...

The decisions and choices captured in this booklet will enable us to help you plan a funeral that truly reflects your life, or the life of your loved one.

HOW WOULD YOU LIKE TO BE REMEMBERED?

When it comes to planning a funeral, people often focus on the practical details, such as when and where the funeral will be held.

Whilst these issues are very important, many people are also choosing to emphasise the celebratory aspects of a funeral, such as the style of the service and those special touches that reflect the life of the person who has died.

That's why we developed this unique *Statement of Wishes* planning tool. Please feel free to complete as little or as much of this booklet as you like. The decisions and choices captured in this booklet will enable us to help you plan a funeral that truly reflects your life, or the life of your loved one.

A STATEMENT OF WISHES CAN BE USED:

- Shortly before or just after a death, to make the initial meeting with us a little easier.
- Well in advance, by those who do not wish to formalise arrangements through a Fixed Price Funeral Plan, but seek peace of mind by recording their wishes in writing.
- By those who wish to complement the practical details included in their Fixed Price Funeral Plan with some celebratory details.

Once completed, we retain your *Statement of Wishes* in our database for future reference, which can be changed or converted into a Fixed Price Funeral Plan at any time.

For more information regarding this unique funeral planning service, please talk with one of our caring Funeral Advice Line consultants on: 13 19 34.

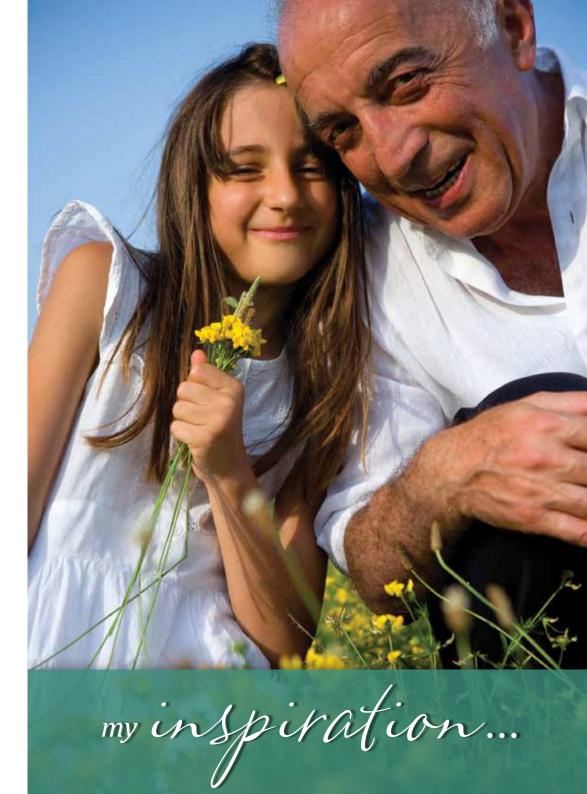
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Managing Director

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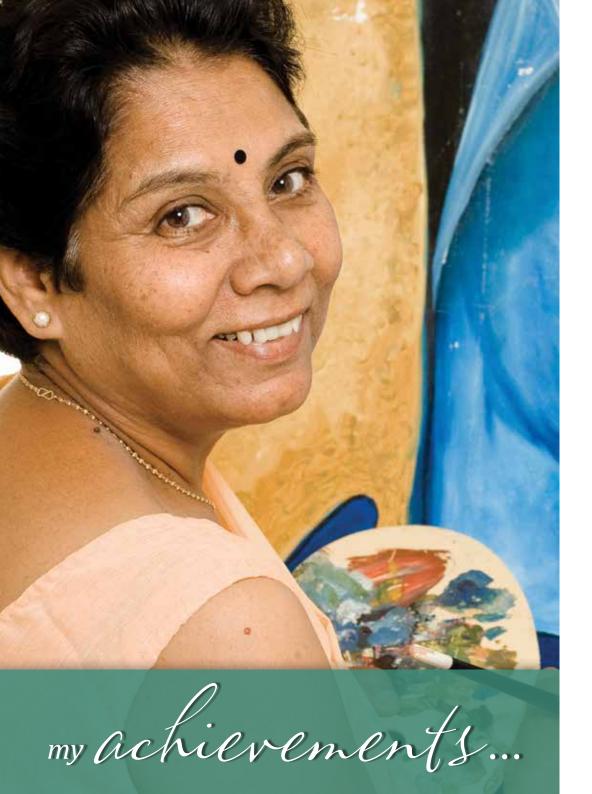
Is this bookl Price Funera		ed in conjunction with a Tobin Brothers Fixed
☐ Yes	□ No	
PERSONAL	DETAILS	
Title:	□ Dr □ Ms □ Mrs	☐ Mr ☐ Miss ☐ Other (please specify on the below line)
Surname: (fo Given Name Surname at	(s): Rirth	
Sex:	□ M	□ F
Usual Reside	ence: (suburb, sta	te, p/code, country)
Work: Mobile:		
		country)
If born over:	seas, date of arriv	val in Australia:





I am of Aboriginal or Torres Strait Islander Origin:	Pension Type: 🗖 Centrelink 🗖 Veterans Affairs
□ No □ Yes, Aboriginal Origin	Pension Number: (if applicable)
☐ Both ☐ Yes, Torres Strait Islander Origin	
	Organ Donor:
Usual profession or occupation during working life:	Reference Number:
	Marital Status:
	MarriedWidow/erDomestic Relationship Registered
Are you retired?	☐ Divorced ☐ Never Married ☐ Domestic Relationship Unregistered
Are you receiving a pension?	
	MARRIAGE(S)
Name of responsible person after my death:	
	MARRIAGE / DOMESTIC RELATIONSHIP (1)
	Given name(s) of Partner:
Address: (suburb, state, p/code, country)	Surname of Partner:
	☐ Male ☐ Female
	Place of Marriage/Registration: (suburb, state, country)
Phone Number:	
	Date of Marriage/Registration:
This person is my Executor:	
□ Yes □ No	MARRIAGE / DOMESTIC RELATIONSHIP (2)
	Given name(s) of Partner:
If not, name of Executor:	Surname of Partner:
	☐ Male ☐ Female
Address: (suburb, state, p/code, country)	Place of Marriage/Registration: (suburb, state, country)
	Date of Marriage/Registration:
Phone Number:	
	MARRIAGE / DOMESTIC RELATIONSHIP(3)
My Will is located at: (please provide full details)	Given name(s) of Partner:
	Surname of Partner:
	Male Female
	Place of Marriage/Registration: (suburb, state, country)
	Date of Manifest (Paristative
	Date of Marriage/Registration: Not registered





CHILDREN

Provide details of each child in order of birth, including their surname at birth. Include any legally adopted children. If a child is deceased, enter "**D**" in the age field. If not born alive, enter "**SB**" in the age field.

1.	Child's Given Name(s):
	DOB:
	Surname at Birth:
	Current Surname:
2.	Child's Given Name(s):
۷.	DOB:
	Surname at Birth:
•••••	Current Surname:
	Current surname:
3.	Child's Given Name(s):
•••••	DOB:
•••••	Surname at Birth:
•••••	Current Surname:
•••••	
4.	Child's Given Name(s):
	DOB:
	Surname at Birth:
	Current Surname:
_	
5 .	Child's Given Name(s):
	DOB:
	Surname at Birth:
	Current Surname:
6.	Child's Given Name(s):
<u></u>	DOB:
•••••	Surname at Birth:
•••••	Current Surname:
•••••	Gui en du nume.
7.	Child's Given Name(s):
•••••	DOB:
•••••	Surname at Birth:
•••••	Current Surname:



PARENTS Mother/Parent's surname (family name): Mother/Parent's given name(s):

Figure 7 arenes given name(s).
Mother/Parent's Surname at birth:
Occupation of the Mother/Parent during working life:
Father/Parent's surname (family name):
Father/Parent's given name(s):
Father/Parent's Surname at birth:
Occupation of the Father/Parent during working life:
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MY FUNERAL SERVICE
My preference is for my Funeral Service to be conducted by:
☐ Abbey Funerals ☐ Herbert King Funerals
I would like my Funeral Service to be held at: (church, chapel, venue)
Address: (suburb, state, p/code, country)
Phone Number:
I wish to be: ☐ Buried ☐ Cremated
I wish to Buried/Cremated at: (please state cemetery/crematorium)

own an existing grave/me Yes No	morial:		
f yes, please provide detail	S:		
am the deed holder: Yes	name/address of deed holde		
	ode, country)		
Please place my cremated r	remains at:		
would like the following person to lead my Funeral Service:			
Clergy	Celebrant	Family	
Name if known: Phone Number if known:			

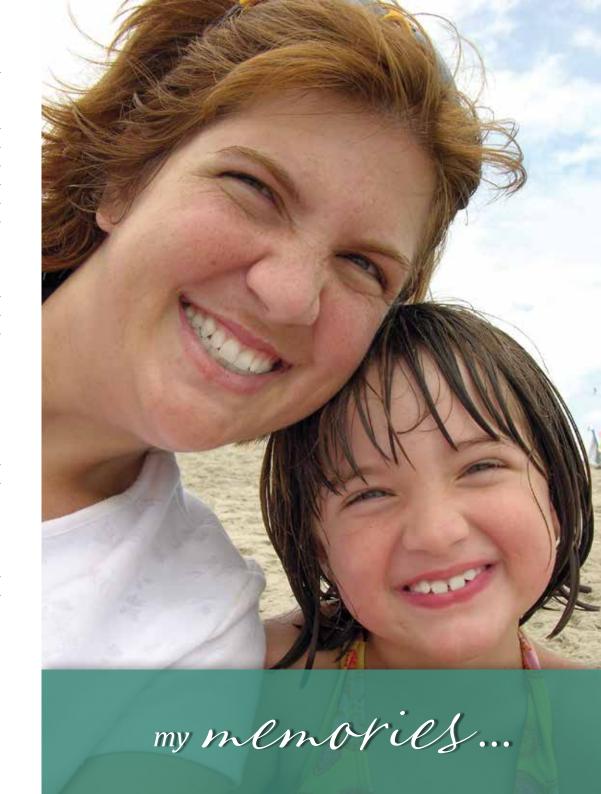




Coffin/Casket Selection:
Please ask these people to carry my coffin/casket:
1.
2.
3.
4.
4. 5.
6.
I would like the funeral procession to drive past:
☐ My home
□ Other (e.g place of significance)
PRESS NOTICES
I would like a Death Notice placed in:
☐ The Age
☐ The Herald Sun
□ Other (please specify)
I would like a Funeral Notice placed in:
□ The Age
☐ The Herald Sun
□ Other (please specify)

☐ I would like a Funeral to be private and therefore no Death/Funeral
Notice to be placed.





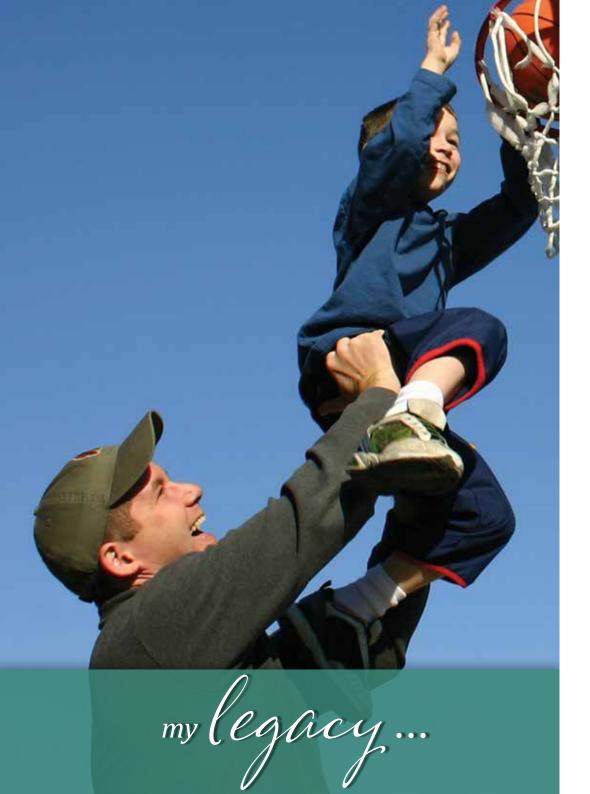
FLOWERS

No flowers by request: ☐ Yes □ No In preference to flowers, I would prefer people make a donation to the following charity: (please specify) I would like the flowers in my floral tribute to include: (e.g. colour/variety) **CLOTHING** My preference for burial garments are as follows: (please specify) **MUSICAL PREFERENCES** I would like: ☐ Recorded Music ☐ Organist □ Other (please specify) ■ Vocalist Piper Music choices:

ADDITIONAL REQUESTS

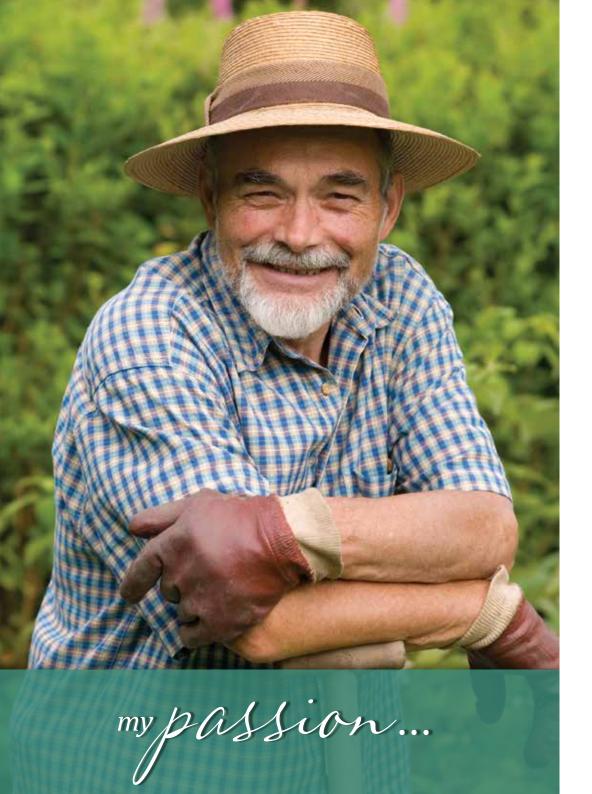
Viewing	Yes	□ No	Family to decide
Rosary	Yes	□ No	Family to decide
Vigil	Yes	□ No	Family to decide
Memorial Book	Yes	□ No	Family to decide
Thank You Cards	Yes	□ No	Family to decide
Order of Service	Yes	□ No	Family to decide
Mass Booklet	Yes	□ No	Family to decide
Memento Card	Yes	□ No	Family to decide
Audio Visual Presentation	Yes	□ No	Family to decide
Photo Board/Easel	Yes	□ No	Family to decide
Candle Lighting	Yes	□ No	Family to decide
Refreshments	Yes	□ No	Family to decide
Champagne/Sherry Toast	Yes	□ No	Family to decide
Other Crecial Touches			
Other Special Touches:			
•••••			





FUNERAL SERVICE CONTENT

I offer the following information to assist those preparing my tribute/eulogy.			
Details of where I grew up are:			
Some of my earliest memories are:			
The best times I ever had were:			
My hobbies & special interests are:			



The most important people in my life are:
Places I worked during my life were:
Some of my life accomplishments are:
Some of the proudest moments in my life are:



Something that most people don't know about me is:	I would like the following read at my funeral: (e.g. poem/letter)		
My hobbies & special interests are:	I would like the following life symbols displayed at my funeral: Medals Art/craft work Photographs Sporting items Other (please specify)		
My involvement in clubs/community groups includes: Lions Rotary RSL Golf/tennis/bowling clubs	Any additional thoughts/information:		
□ Other (please specify)			
Please reflect the following acknowledgments on my behalf at my funeral			
service:			





The spirit of this booklet is to assist my family and those left behind in preparing for my funeral service.

☐ I provide permission for my family to make any appropriate changes.

My preference is for these arrangements to rem	am unc	nangea
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Signatı	1	r	E	,
Date		•••	•	•

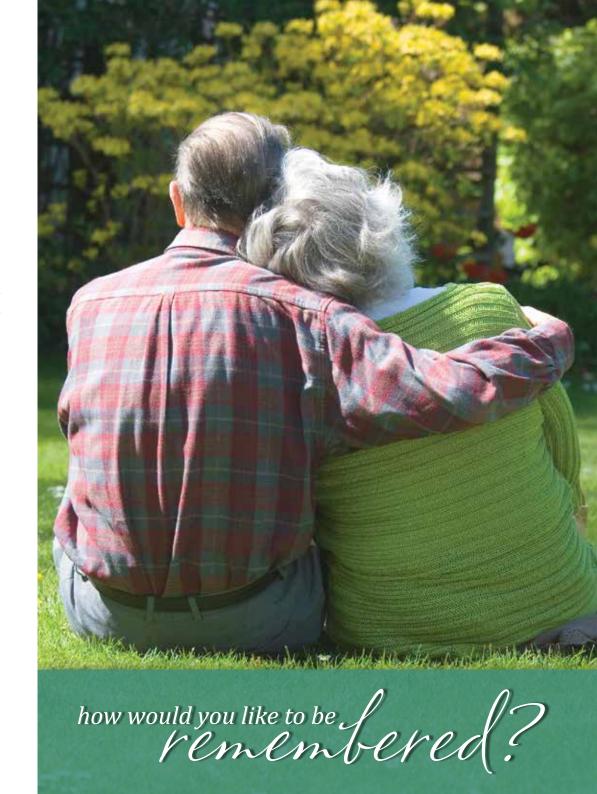
On completion of your *Statement of Wishes* please send the original copy to:

Funeral Advice Line Tobin Brothers Funerals PO Box 251 North Melbourne Victoria 3051

We will place your details and requests on our *Statement of Wishes* database. We will then forward you the original plus one copy in the mail and recommend that you place one copy with your other important papers. We advise you to give the second copy to the person who will be responsible for finalising your funeral arrangements.

For further details, or if you would now like to proceed with a Fixed Price Funeral Plan with Tobin Brothers Funerals, please telephone our Funeral Advice Line on: 13 19 34 or email your enquiry to: info@tobinbrothers.com.au















For 24 Hour Service and Enquiries please telephone our Funeral Advice Line: 13 19 34

www.tobinbrothers.com.au