



TOBIN BROTHERS FUNERALS

Celebrating Lives SINCE 1934



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

Your Wishes, Your Way

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.

You may also download your *Statement of Wishes* from our website, complete it digitally and email it to: info@tobinbrothers.com.au.

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.



James MacLeod OAM, Managing Director

My Personal Details

Is this booklet being completed in conjunction with
a Tobin Brothers Fixed Price Funeral Plan? ☐ Yes ☐ No

Title:

☐ Dr ☐ Mr ☐ Ms ☐ Miss ☐ Mrs ☐ Other (please specify below)

Surname: (Family name)

Given Name(s):

Surname at Birth:

Gender: ☐ M ☐ F

Usual Residence: (suburb, state, postcode, country)

PHONE NUMBERS

Home:

Work:

Mobile:

Date of Birth:

Place of Birth: (suburb, state, country)

If born overseas, date of arrival in Australia:

☐ No ☐ Yes, Aboriginal Origin

☐ Both ☐ Yes, Torres Strait Islander Origin

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Are you receiving a pension? ☐ Yes ☐ No

Pension Type: ☐ Centrelink
☐ Veterans Affairs

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Name of responsible person after my death:

Address: (suburb, state, postcode, country)

Phone Number:

This person is my Executor: ☐ Yes ☐ No

If not, name of Executor:

Address: (suburb, state, postcode, country)

My Will is located at: *(please provide full details)*



MARRIAGE(S)

MARITAL STATUS:

- ☐ Married ☐ Widow/er ☐ Never Married ☐ Divorced
☐ Domestic Relationship Registered ☐ Domestic Relationship Unregistered

MARRIAGE / DOMESTIC RELATIONSHIP (1)

Given name(s) of Partner:

Surname of Partner:

☐ Male ☐ Female

Place of Marriage/Registration: *(suburb, state, country)*

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Date of Marriage/Registration: ☐ Not registered

MARRIAGE / DOMESTIC RELATIONSHIP (2)

Given name(s) of Partner:

Surname of Partner:

☐ Male ☐ Female

Place of Marriage/Registration: *(suburb, state, country)*

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Date of Marriage/Registration: ☐ Not registered

MARRIAGE / DOMESTIC RELATIONSHIP(3)

Given name(s) of Partner:

Surname of Partner:

☐ Male ☐ Female

Place of Marriage/Registration: *(suburb, state, country)*

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Date of Marriage/Registration: ☐ Not registered

PARENTS

Mother/Parent's Surname (Family Name):

.....

Mother/Parent's Given Name(s):

.....

Mother/Parent's Surname at Birth:

.....

Mother/Parent's Occupation:

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Father/Parent's Surname (Family Name):

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Father/Parent's Given Name(s):

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Father/Parent's Surname at Birth:

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Father/Parent's Occupation:

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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, check “**D**” in the DOB field, if not born alive, check “**SB**” in the DOB field.

1. Child's Name(s):

DOB: ☐ D ☐ SB

Surname at Birth:

Current Surname:

2. Child's Name(s):

DOB: ☐ D ☐ SB

Surname at Birth:

Current Surname:

3. Child's Name(s):

DOB: ☐ D ☐ SB

Surname at Birth:

Current Surname:

4. Child's Name(s):

DOB: ☐ D ☐ SB

Surname at Birth:

Current Surname:

5. Child's Name(s):

DOB: ☐ D ☐ SB

Surname at Birth:

Current Surname:

6. Child's Name(s):

DOB: ☐ D ☐ SB

Surname at Birth:

Current Surname:

*If it's legal,
It's possible*

While some people prefer a more traditional funeral, others are celebrated in their own truly unique way to suit their personality.

At Tobin Brothers, you are only limited by the law and your imagination.

My Funeral Preferences



My Funeral Preferences

My preference is for my Funeral Service to be conducted by:

- ☐ Tobin Brothers Funerals ☐ Peter Tobin Funerals
☐ Frances Tobin Funerals By Women ☐ Abbey Funerals

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

Address: *(include suburb, state, postcode, country)*

Phone Number:

I would like the following person to lead my Funeral Service:

- ☐ Clergy ☐ Celebrant ☐ Family

Name if known:

Phone Number if known:

I would prefer a Memorial Service (no coffin or casket present) at:

Address: *(suburb, state, postcode, country)*

Phone Number:

I wish to be: ☐ Buried ☐ Cremated

I wish to Buried/Cremated at:

(please state cemetery/crematorium)

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I own an existing grave/memorial:

☐ Yes ☐ No

If yes, please provide details:

I am the deed holder for the grave/memorial:

☐ Yes ☐ No

If no, please provide name and address of deed holder:

Name:

.....

Address: *(suburb, state, postcode, country)*

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Please place my cremated remains at:

CULTURAL OR SPECIALIST SERVICE

- ☐ Auslan
 - ☐ Language other than English (please specify)
 - ☐ Other (please specify)
-

PRESS NOTICES

- ☐ I would like a Tobin Brothers Funerals online Tribute page (no additional cost)

I would like a Death Notice placed in:

- ☐ The Age
 - ☐ The Herald Sun
 - ☐ Family to decide
 - ☐ Other (*please specify*)
-
-

- ☐ No Death Notice

I would like a Funeral Notice placed in:

- ☐ The Age
 - ☐ The Herald Sun
 - ☐ Family to decide
 - ☐ Other (*please specify*)
-
-

- ☐ No Funeral Notice

- ☐ I would like the funeral details to be private (ie. not visible to the public)



COFFIN/CASKET SELECTION :

Scan QR Code for options

I would like to have a ☐ Coffin ☐ Casket

Name of Coffin/Casket

.....

☐ Coffin/Casket to be present at the Service

Please ask these people to carry my coffin/casket:

1.
2.
3.
4.
5.
6.

I would like the funeral procession to drive past:

☐ My home

☐ Other (please specify, eg. place of significance)

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PRINTED STATIONERY

Scan QR Code for options

My preference for printed stationery are:

(please specify, eg. Order of Service, Santini Card, Bookmark, Framed Photograph...)

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FLOWERS

Scan QR Code for options

I would like to have a Floral Tribute on the Coffin/Casket

☐ Yes

I would like the flowers in my floral tribute to include: *(e.g. colour/variety)*

I would like to have additional flowers on display at the funeral

☐ Yes

I would like these flowers to include: *(e.g. colour/variety)*



☐ In lieu of flowers I would prefer people to make a donation to the following charity: *(please specify)*

Additional or alternative items or keepsakes to be present: *(eg, sporting equipment or memorabilia, medals, photographs, art or craft work. Please specify)*

I would like guests to wear or bring particular items: *(please specify)*

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CLOTHING

☐ Own Clothing

My preference for burial garments/ accessories are as follows:
(please specify)

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☐ Tobin Brothers Garment
(additional cost)



MUSIC

I would like: ☐ Organist

☐ Vocalist ☐ Piper

☐ Recorded Music

☐ Other *(please specify)*

Music Choices:

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ADDITIONAL REQUESTS

Viewing	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to decide
Rosary	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to decide
Vigil	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to decide
Memorial Book	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to decide
Thank You Cards	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to decide
Order of Service	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to decide
Mass Booklet	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to decide
Memento Card	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to decide
Audio Visual Presentation	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to decide
Photo Board/Easel	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to decide
Candle Lighting	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to decide
Refreshments	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to decide
Champagne/Sherry Toast	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to decide
Webcast	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Family to decide

(☐ Public Webcast ☐ Private Webcast)

Special Reading or Poetry *(please specify)*:

Other Requests *(please specify)*:

My Legacy



“Legacy is not
leaving something behind
for other people.
It’s leaving something behind
in other people.”

- *Peter Strople*

My Life and Legacy

I offer the following information to assist those in preparing
my tribute or 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:

Something that most people don't know about me is:

Some of my life accomplishments are:

Some of the proudest moments in my life are:

My involvement in clubs/community groups includes:

- ☐ Lions ☐ Rotary ☐ RSL ☐ Golf/tennis/bowling clubs
☐ Other *(please specify)*

Please reflect the following acknowledgments on my behalf at my funeral service:

I would like the following read at my funeral: *(e.g. poem/letter)*

Any additional thoughts/information/message to those who attend my funeral:

Any additional thoughts continued...

Statement of Wishes

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 remain unchanged.

Signature:

Date:



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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.

You may also download your *Statement of Wishes* from our website, complete it digitally and email it to: info@tobinbrothers.com.au.

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.

www.tobinbrothers.com.au

IMPORTANT DOCUMENTS & PASSWORDS

To my family, the following information will help you
in the event of my death:

Key Documents I have in place are:

- ☐ Statement of Wishes booklet ☐ Will and Last Testament
☐ Power of Attorney ☐ Advanced Care Directive

Other:

These documents are stored in:

Below is a list of my providers:

Phone:

Internet:

Electricity:

Gas:

Water:

Bank(s):

Superannuation:

Insurances (*home, car, life...*)

My passwords are:

Phone:

Computer:

Laptop:

Email Address:

Social media:

Other:

* To protect your personal information, please remove this page or fill it out AFTER submitting your Statement of Wishes to Tobin Brothers Funerals. You may also choose to leave it blank.



TOBIN BROTHERS FUNERALS

Celebrating Lives SINCE 1934



Abbey
FUNERALS

Peter  Tobin
FUNERALS

INCORPORATING
HERBERT KING FUNERALS,
HOWARD SQUIRES FUNERALS,
JAMES FERRIS FUNERALS

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

www.tobinbrothers.com.au

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