

End of Life Planning

Unitarian Universalist Congregation of Columbia
7246 Cradlerock Way ~ Columbia, MD 21045

Confidential Personal Information – will be kept in a locked box for minister’s eyes only

Name _____ Phone _____ Email _____

Address _____

Persons to contact (next of kin, friend(s), attorney)

Name _____ Phone _____ Email _____

Address _____

Relationship to you _____

Name _____ Phone _____ Email _____

Address _____

Relationship to you _____

Name _____ Phone _____ Email _____

Address _____

Relationship to you _____

Name _____ Phone _____ Email _____

Address _____

Relationship to you _____

If beset with a terminal illness:

Would you desire the service of Hospice as an alternative to spending a long period of time in a nursing home or hospital? Yes No (please circle one)

Do you have a Directive to Physicians? Yes No

Will you wish to have a DNR (Do Not Resuscitate) order? Yes No

Has your next of kin, best friend, or significant other been informed of your wishes? Yes No

Final Arrangements:

Do you have existing arrangements with a funeral home? Yes No

Funeral Home _____ Phone _____

Do you wish to be cremated? Yes No

Where (if at all) do you wish for your ashes to be placed? _____

Have you chosen and signed a contract for your "final resting place"?

Do you wish to be buried? Yes No

Do you own a cemetery plot? Yes No

Location of the plot _____

Location of the deed to the plot _____

Who will be responsible for expenses connected with burial or cremation? Prepaid? Yes No

Name _____ Phone _____

Where would you like your memorial service to be held? _____

Have you clearly communicated with your loved ones where the following can be found?

- | | |
|-----------------------------------------|----------------------------------|
| will | social security card |
| living will | medical cards |
| copies of credit cards (front and back) | long term care policy |
| mortgage documents | list of financial assets |
| safety deposit box location | insurance policies |
| location of key | passport |
| person(s) with authorized access | notes to be included in obituary |

To be included in my Memorial Service

Favorite songs from our hymnbook(s):

title _____ # _____

title _____ # _____

title _____ # _____

title _____ # _____

Selections I would like played instrumentally or from a recording:

selection _____ source _____

selection _____ source _____

selection _____ source _____

selection _____ source _____

Readings:

source _____ page # _____

source _____ page # _____

source _____ page # _____

source _____ page # _____

Persons I would especially like to speak: _____

Other memorial service requests: _____

Memorial Service planning (continued)

What one adjective would you use to describe yourself? _____

What are your particular loves or hobbies? _____

What one value or lesson would you most want to teach the next generation? _____

What one achievement or accomplishment are you most proud of? _____

What are some of your favorite phrases or sayings? _____

Describe something special you have posted on a wall or elsewhere – a picture or motto that expresses who you are:

What are your nicknames (if any)? _____

What cause(s) or movement(s) have you supported with your time and resources?

In what ways is the world a little different because of you?

What one thing would you have the minister say during your memorial service?

Please attach any additional information – résumé of personal, academic, business achievements; anecdotal information; etc. – that may be helpful to the minister or person(s) speaking at your service.