

# HOPE FAMILY FUNERALS

Personal Details and Funeral Wishes



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## PERSONAL DETAILS

First name(s):

Surname:

First name(s) at birth (if different):

Surname at birth (if different):

Phone:

Email:

Full residential address:

Date of birth:

Town of birth:

Country of birth:

Year of arrival if born overseas:

Gender:

Ethnicity:

NZ Māori descent? Yes  No

Main occupation prior to retirement:

### Do any of these apply to you?

Justice of the Peace  Marriage Celebrant  Hold a military honour or award

RSA Participation  Any war service details:

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## CHILDREN

*Note: if a child has passed, please put their date of death followed by a D (legally adopted children included – Whangai children to be included on the birth parents' certificate).*

First name and date of birth of each daughter:

First name and date of birth of each son:

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## PARENTS

Mother's first name(s):

Mother's most recent surname:

Mother's full name at birth:

Mother's occupation:

Father's first name(s):

Father's most recent surname:

Father's full name at birth:

Father's occupation:

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## CURRENT RELATIONSHIP STATUS

**Please select one of the following:**

Married  Spouse/Partner deceased  Marriage/Civil union dissolved  Permanently separated   
Never in a legal relationship  De facto  Separated from de facto  Civil Union

## MOST RECENT RELATIONSHIP

Marriage/de facto:

Age at marriage:

Place of marriage:

Spouse/partner full name prior to marriage:

DOB of spouse (if living):

Gender:

## PREVIOUS RELATIONSHIP

Marriage/de facto:

Age at marriage:

Place of marriage:

Spouse/partner full name prior to marriage:

DOB of spouse (if living):

Gender:

*Please enter any other relationships below:*

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## CONTACTS

### GP

Name:

Medical practice:

### Executor (or next of kin if no executor)

Full name:

Phone number:

Email address:

Postal address:

### Main contact (if different from executor)

Full name:

Phone number:

Email address:

Postal address:

### Lawyer

Name:

Company:

Contact details:

### Authorized loved ones:

*I give permission to the family/friends listed below to collect any belongings.*

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## FUNERAL WISHES

Burial or cremation:

Cemetery/crematorium:

What to do with any jewellery: Keep on  Return to...

Viewing? Yes  No

Body care:

Please select one of the following:

Direct Cremation  Farewell  Funeral Service  Memorial Service  Tangi

Place of service:

Celebrant:

Casket:

Casket flowers:

Committal petals/sprigs:

Memorial book:

Framed photo:

Service sheets:

Photo slideshow:

Catering:

Livestream and recording of the service:

Music choices:

Newspaper notices? Yes  No

*If yes, then which newspapers? And when to place?*

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I will be applying for: WINZ  ACC  Life Insurance

How did you hear about us?

Any notes for the funeral director:

*Hope Family Funerals respects your privacy and will only use the information provided for the purpose for which it has been acquired.*