

## Funeral Preplanning Checklist

**Bethel College Mennonite Church, PO Box 364, North Newton, KS 67117**  
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FULL NAME \_\_\_\_\_ DATE \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_  
PLACE OF BIRTH \_\_\_\_\_

No one plans to die. But we all know that death is inevitable. Knowing this, one of the most helpful things we can do for ourselves, our surviving relatives and our church is to give thought and planning to that time before it comes to us. We believe it is good Christian stewardship, like making a will. This worksheet is intended as a tentative statement of your preferences. It will be kept on file at the church office and can be amended or discarded at any time by contacting the pastor or the church office.

This checklist has been studied by our Board of Deacons and suggested for congregational use. We are asking anyone who desires to have this form on file at the church to fill it out and return it to us, keeping a duplicate copy for your files at home. If you have additional wishes to express, use the back of the sheet. The form is not meant to be exhaustive, only suggestive, and we hope you will use this opportunity for reflection and planning. We believe that part of the care and concern exercised within the church is to help each of us to be somewhat ready for the eventuality that comes to all.

### I. PROLONGING LIFE

\_\_\_\_\_ I want to be on record as opposed to “heroic measures” to prolong my life in the event of a terminal illness with an unfavorable prognosis.

\_\_\_\_\_ This preference has been indicated on a separate document (sometimes called a living will), copies of which are located at \_\_\_\_\_

### II. USE OF BODY FOR TRANSPLANTS AND SCIENTIFIC PURPOSES

\_\_\_\_\_ I want to be on record as gladly willing that vital organs or tissue be available for transplant upon my termination.

\_\_\_\_\_ I have made the following arrangements for donation of vital organs and/or the body for medical or scientific purposes.  
\_\_\_\_\_

### III. FUNERAL ARRANGEMENTS

Mortuary preferred \_\_\_\_\_  
\_\_\_\_\_ I have already made some arrangements there.

\_\_\_\_\_ I prefer a burial with family and friends, with a public memorial service at the church afterwards at an appropriate time.

\_\_\_\_\_ I prefer a funeral service at the church with burial following.

\_\_\_\_\_ Other (explain on back of sheet)

### IV. DISPOSITION OF REMAINS

My preference with regard to the disposition of remains is:

\_\_\_\_\_ Burial in \_\_\_\_\_ (name of cemetery); plot is already owned.

\_\_\_\_\_ Do not own a burial plot, but would prefer to be buried in a cemetery at \_\_\_\_\_ (city or church).

\_\_\_\_\_ Cremation. \_\_\_\_\_ I have a niche in the BCMC Columbarium.

Disposition of ashes has been arranged as follows: \_\_\_\_\_

\_\_\_\_\_ Other (explain on back of sheet)

V. WORSHIP SERVICE SUGGESTIONS

My choice of hymns, Scripture, poetry, etc., reflecting my commitments in life, are as follows:

Hymns \_\_\_\_\_

Scripture \_\_\_\_\_

Special music \_\_\_\_\_

Poetry or other readings \_\_\_\_\_

VI. MEMORIAL GIFTS

I would prefer the following \_\_\_\_\_

VII. WILL

\_\_\_\_\_ I have made a will which is filed at \_\_\_\_\_

VIII. FAMILY AND PASTORAL CONSULTATION

\_\_\_\_\_ I have discussed this form with appropriate family members and believe I have their support in the suggestions and plans I have made.

\_\_\_\_\_ I request an appointment with the pastor to discuss this statement or other options.

SIGNED \_\_\_\_\_ PASTOR \_\_\_\_\_

ADDITIONAL COMMENTS OR EXPLANATIONS:

PEOPLE TO CONTACT UPON DEATH

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_