

## Personal Wishes Regarding Funeral

Burial or Cremation: .....

If BURIAL, Which Cemetery: .....

Details of Plot if already obtained: .....

If CREMATION, wishes regarding placement of Ashes: .....

FUNERAL DIRECTOR: Robert J. Cotton, Palmerston North

Have you pre-paid your funeral: (Yes/No) (If yes give details/membership number)  
.....

Venue for Service: .....

Funeral to be: Private / Public. ....

Who do you wish to Officiate: .....

Notices in the following Papers: .....

Type of Casket: .....

Colour & Preference for casket flowers: .....

Wishes for donations in Lieu of flowers: .....

Favourite Hymns: .....

Favourite Music to be played at service: .....

PowerPoint / Visual Presentation. ....

Viewing / Preparation: Yes / No . ....

Lodge or Organisations to be notified: .....

Personal Preference for Pallbearers: .....

.....

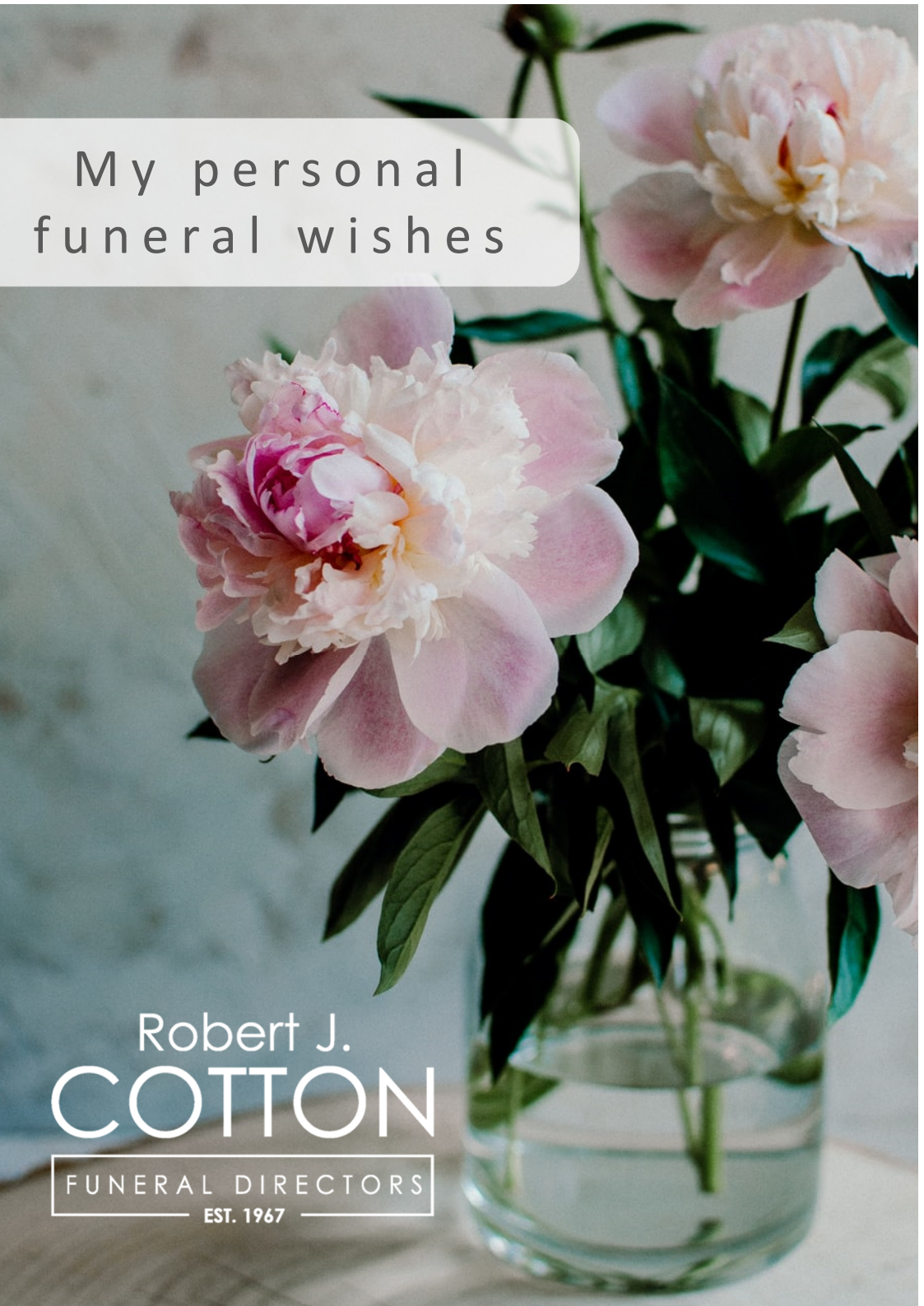
Monumental Requirements: .....

People to be notified: .....

Person Responsible for making Funeral Arrangements: .....

## CONTACT US

admin@robertjcotton.co.nz  
06 355 2529 ANY TIME  
robertjcotton.co.nz  
697 Main Street, Terrace End  
PALMERSTON NORTH

A photograph of several large, multi-petaled peonies in shades of pink and white, arranged in a clear glass vase. The flowers are set against a soft, out-of-focus background. The vase is partially filled with water, and the stems and green leaves of the flowers are visible.

My personal  
funeral wishes

Robert J.  
**COTTON**  
FUNERAL DIRECTORS  
EST. 1967

We often have people inquiring about pre arranging their own funeral. This form has been produced to enable those who wish to, to record their personal details along with their personal wishes regarding their own funeral. It is suggested that once completed it can be placed with your will, put with your private papers or left with us where it is kept in the strictest confidence. Wherever you decide to place these details it is important that you advise your next of kin or Trustee of your wishes.

**Pre-Payment**

For those who wish to pre-pay their funeral with Robert J. Cotton Ltd. we can offer you the ‘**A.N.Z. Trust Management Account**’. You can place a lump sum into the plan or pay installments. The minimum deposit for the ‘Trust Management Account’ is \$500.00. Any funds received are paid to The A.N.Z. Bank Ltd who manages the account. The account is held at the bank in the name of the participant under Robert J. Cotton portfolio. Pre-payment can take the burden away from family members who are left. Also for those in long term residential care pre-paid funeral funds are exempt from asset testing.

Please feel free to contact the staff at Robert J. Cotton Ltd. If you require further information on pre-payment.

**Details Required for Registration of Death**

Full Name: . . . . .  
 Address: . . . . .  
 . . . . .  
 Birth Date: . . . . . Place of Birth: . . . . .  
 Period in N.Z.: . . . . . Occupation: . . . . .  
 Name of Father: . . . . .  
 Name of Mother: . . . . .  
 Mother’s Maiden Name: . . . . .  
 Mothers Occupation: . . . . . Fathers Occupation: . . . . .

**MARRIAGE DETAILS:**

1) To Whom: . . . . .  
 Age at Marriage: . . . . . Place of Marriage: . . . . .

**Previous Marriages:**

2) To Whom: . . . . .  
 Age at Marriage: . . . . . Place of Marriage: . . . . .

*Previous Marriages continued:*

3) To Whom: . . . . .  
 Age at Marriage: . . . . . Place of Marriage: . . . . .

Birth date of spouse (if Living): . . . . .  
**If Divorced**, Date of Birth of former spouse (Living): . . . . .

**BIRTH DATES OF LIVING CHILDREN:**

Male: . . . . .  
 Female: . . . . .

**ETHNIC GROUP(S):** . . . . .

Are you descended from a N.Z. Maori [ ]Yes – [ ]No – [ ]Don’t Know . . . . .

**Justice of the Peace (Yes/No)** . . . . .

Holder of any Honour(s) (Yes/No) (Name of Honours(s)) . . . . .

**WAR SERVICE:** Ex Service Person: Y/N:

No: . . . . . Rank: . . . . . Unit: . . . . .  
 Where Served: . . . . . Year Served: . . . . .

Doctor: . . . . . Ph: . . . . .

Next of Kin: . . . . . Ph: . . . . .

Address: . . . . .

Solicitor: . . . . . Ph: . . . . .

Trustee: . . . . . Ph: . . . . .

Notes: . . . . .

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