



Swansea Quakers

Swansea Quakers Funeral Wishes Form

Before completing this form, you may want to discuss these details with members of your family or close friends.

PART 1 - *About You*

Your Name _____

Your Address _____

About your next of kin, or whoever will be responsible for your funeral arrangements:

Name _____

Address _____

Phone Numbers _____

E Mail _____

Would you like Quakers to arrange your funeral? Yes No Family Decision

PART 2 - *If you are able to fill in any of this section, it would be helpful.*

Burial Yes No Family Decision

Green Burial Yes No Family Decision

Cremation Yes No Family Decision

Memorial Yes No Family Decision

Other Yes No Family Decision

Use of your body for medical research Yes No Family Decision

Use of your body for organ donations Yes No Family Decision

PART 3 - *It would be very helpful to know about*

Any arrangements you have already made, for example, funeral plans, burial plots etc., or permissions you have given for the use of your body for medical purposes. (Use the other side of the form if you wish.)

Any environmental, financial or other principles you would like to be followed in planning your funeral.