

**Lakehead Unitarian Fellowship**

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**A Celebration of Your Life: Memorial Service Planning Worksheet**

Use this form as a tool to express/indicate your wishes. Adapt it as necessary to suit you, and feel free to answer only the questions that matter to you. If you so choose, this information will be kept in a confidential file at Lakehead Unitarian Fellowship for use as a reference at the time of your death. This is not a legal or binding contract, but rather, is intended as a guide and a comfort for your loved ones.

Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Phone(s) \_\_\_\_\_

City and Province \_\_\_\_\_ Postal Code \_\_\_\_\_

If appropriate, provide the following information:

Preferred funeral home \_\_\_\_\_

Memorial Society \_\_\_\_\_

Cemetery lot \_\_\_\_\_

Circle preferences (circle as many as apply):

- 1. Funeral                      Memorial Service                      Graveside                      No service
- 2. Visitation                      No Visitation
- 3. Open Casket                      Closed Casket                      No Casket
- 4. Direct Cremation                      Cremation after funeral                      Ashes present at service
- 5. Burial of body                      Burial of cremains
- 6. Mausoleum                      Niche
- 7. Scattering of ashes                      Where? \_\_\_\_\_
- 8. Reception following service                      w/refreshments                      Where? \_\_\_\_\_
- 9. Other notes (religious/cultural practices, memorial services in multiple locations, etc.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**SERVICE ELEMENTS:**

Where would you like the service/funeral to be held?

Of your family and friends, who should be consulted in the planning of your memorial service?

Do you have a person(s) in mind to write and/or to deliver the eulogy?

Do you plan to write, or have you already written, your own eulogy?

Who would you like to lead the service (minister, chaplain, friend)?

Of your family and friends, who would you like to participate in the service as speakers, readers, candle lighters, ushers, pall bearers, etc.? Are there any particular roles that you have in mind for particular persons?

What are your preferences for music at the service? Do you have favourite hymns? - favourite musicians? – favourite recorded music?

Are there any particular readings (poetry, prose, responsive, sacred texts, etc.) that you would like read at your service?

What about a time for sharing memories? Do you envision this happening during the service, or at a reception following? Are there any particular people whom you would like to have share something of your life?

Are there any particular rituals (with candles, flowers, rocks, etc.) that you would like as part of the service?

Is there anything that you specifically wish NOT to have included in a memorial service?

**OTHER ARRANGEMENTS:**

Think about the order of service. Are there any particular quotes, acknowledgements, or photos that you would like included? (Consider putting a favourite photo or two on file with LUF.)

If you would like to have things on display at the service or at the reception, what would those things be (memorabilia, photos, certificates, clothing, handiwork, etc.)?

Do you have specific wishes for memorial gifts? (Provide full name and contact information for any organization. Please consider LUF in making this decision.) What about flowers?

Do you foresee the need for a memorial service in more than one location (e.g., current home and home town)?

What epitaph might you like on your headstone/plaque on the mausoleum or niche?

Are there any conflicts or sensitivities in your family of which we should be aware?

Other notes or concerns:

**OTHER THINGS TO CONSIDER IN PRE-PLANNING:**

- Sharing what you've decided. Who will you tell, and where will the information be kept.
- Legal Planning (Will, Estate Planning, Power of attorney/executor)
- Financial Planning (Memorial societies, prepayment, burial plans)
- Organ donation and/or donation of body to science/medical school
- Living Wills
- Power of Attorney for Health Care