

Recording your wishes

The following is a form containing some simple steps you should take to record your wishes. Creating a document to inform your family, friends, executors and guardians of your detailed wishes, places them in the best possible position from which to make decisions on your behalf at the end of life and once your death occurs.

Copies of this document should be stored at home, with your executor, doctor and solicitor and if you have a chosen funeral director, they should have a copy as well. Your family should be told where to find them and a note placed on your fridge to alert anyone in an emergency of where to find your wishes document.

Practical Information

Contacts: Next of Kin _____

 Phone and email _____

 Address _____

 Solicitor _____

 Enduring Power of Attorney _____

 Enduring Guardian _____

 Location of Will _____

 Executor of your Will and Contact details _____

 Location of medical wishes _____

 Do you have a pre-paid or pre-arranged funeral? _____

 Location of funeral arrangements _____

 Social media/password location _____

People/Organisations to notify

Employer/s _____

Doctor/s _____

Health Professionals _____

Religious leader/support _____

Landlord _____

Government

Centrelink	(132 850)	Medicare	(132 011)
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Dept Veteran's Affairs	(133 254)	ATO	(132 861)
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Service Tas	(1300 135513)	AEC (voting)	(132 326)
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Local Council _____

Services

Electricity _____

Gas _____

Telephone / Internet _____

Water/Hydro _____

Post Office _____

Newsagent _____

Trade Union _____

Clubs & Associations _____

Bank/Financial Institutions _____

Superannuation Fund _____

Health Benefits Fund _____

Insurance (life, house, car) _____

Accountant _____

Financial Planner _____

Shares _____

Memberships _____

Home services _____

Other _____

Information for the Registration of a Death

Personal Details

Full name: _____

Address: _____

Occupation when working: _____

Sex: _____

Religion: _____

Date of Birth: _____

Place of Birth: _____

Year arrived Australia: _____

Parents Details

Father's Name: _____

Father's Occupation: _____

Mother's Name: _____ (Maiden name): _____

Mother's Occupation: _____

Marriages and children:

No. of Marriages: _____ Present Marital status: _____

1st Marriage

Place: _____

Age at Marriage: _____

Name of Spouse: _____

2nd Marriage

Place: _____

Age at Marriage: _____

Name of Spouse: _____

3rd Marriage

Place: _____

Age at Marriage: _____

Name of Spouse: _____

Names of children (including adopted and deceased children) and dates of birth (and death?):

If the person is in a caring/significant relationship:

Name of Partner: _____

Date of relationship being registered: _____

Registration number: _____

Considerations when Dying

Some things to consider:-

- How do you want to be treated?
- How do you want to feel?
- Where would you like to be?
- What would you like to see?
- What atmosphere you want created (music/incense/lighting, etc.)
- Who would you like to be there?
- Do you want to be conscious?
- What level of medical treatment and intervention would you like?
- What kind of pain relief do you want?
- What life sustaining measures are acceptable to you?

Your thoughts on these considerations:

Other wishes, needs and wants:

If life support treatment will only delay my death, I request:

	Yes	No
1. Medical treatment discussions in my presence?	<input type="checkbox"/>	<input type="checkbox"/>
2. Discuss medical treatment with family present?	<input type="checkbox"/>	<input type="checkbox"/>
3. Keep me informed of my prognosis and changes?	<input type="checkbox"/>	<input type="checkbox"/>
4. I would like to have people present in my last hours?	<input type="checkbox"/>	<input type="checkbox"/>

Particular people I would like
present: _____

Particular people I would welcome visits from (family, friends, priests, colleagues,
etc.): _____

People I would like to exclude please: _____

The atmosphere I would like around me is: _____

If it can be done, my preference is to die:

1. My Home.
2. Palliative Care/Hospice.
3. Age Care Facility/Nursing Home.
4. Hospital.
5. Not important to me.

My other preferences:

Organ/medical donations:

Arrangements for my pets: _____

My digital media accounts are: _____

Person I authorise to deal with them: _____

Family & friends I would like notified of my illness/death (name, address or phone):

After Death and Funeral Wishes

Having a funeral is not compulsory. It is possible with the right planning to have your body kept at home and when ready, placed in a shroud or coffin made by family and friends. You can be kept at home for a few days or a few hours. You can have a funeral at home. In some cases, burial and cremation can also be arranged privately.

Putting your wishes in writing takes away any uncertainty at a time when your family is grieving and under stress. Some situations can cause various issues at your time of death if they are not clear and included in a plan. For example, issues around the recognition of your religious beliefs and cultural practices may be considerations people are not prepared for.

Decisions might be big, expensive ones, like where to purchase a grave, whether single or double or small, or simple ones, like which songs are to be played .

- Pre-Arranging a funeral involves sorting out the details amongst the family beforehand and possibly providing those wishes and instructions to anyone who will be involved in the death care or funeral process.
- Pre-Payment takes pre-arrangement to the next level and invests for the planned funeral at today's prices. This is done through contemporary funeral homes and can be done up front, or on a payment plan (depending on the provider) and the funds are securely invested. This option also reduces assessable assets for calculating pension payments, however, it is not always a financially viable option.
- Funeral Insurance (which is often advertised as an alternative to pre-paying a funeral) and Funeral Bonds should be treated with caution.

Funeral Type

Home funeral or with a contemporary funeral home: _____

Funeral location: _____

Burial or cremation: _____

Grave location: _____

Ashes instructions: _____

Memorial/funeral/celebration of life: _____

Just some of your options:-

- I would like a green/natural burial
- I would like a cremation
- I want to stay at home after I die
- Take me home for a vigil - 4 hours 1 day 3 day up to you
- I would like a vigil at the funeral home

- Please leave my body to rest. Don't make preparation of my body for ___ days
- Hire an electric cold plate/blanket or Techniice to cool my body
- Leave me in the clothes I die in
- Dress me in special clothes which I have picked
- Wash my whole body
- Wash my face and hands only
- Only clean me if needed
- Please wrap me in a shroud only, no coffin
- Please use only natural fibres to dress me
- Place me in an open coffin during the ceremony
- Let people visit me at the funeral home or in my home
- Let the funeral home care for me, but no invasive procedures
- Provide only chemical free care and preparations of my body
- I want a traditional/conventional ceremony
- No embalming please
- No mouth stitch or eye caps please
- My choice of coffin is:
 - Untreated pine
 - Cardboard
 - Homemade
 - Wool
 - Wicker
 - Shroud
- Provide catering after the funeral

I want my funeral to feel like:

If you choose a contemporary funeral, then it is best to shop around and talk to a few funeral homes. A coffin, if you chose to have one, does not have to be purchased from the funeral home. You can source them independently and they can be kept at home to decorate in advance, as someone is dying or anytime you wish.

Songs you would like played or sung and when:

Readings

	Reading:	Reader:
1 st	_____	_____
2 nd	_____	_____
Other	_____	_____

Pall-bearers

Other Requests

