Arrangements on Death Declaration

I, (FULL NAME)

of (ADDRESS)

wish for the arrangements for the burial or cremation of my remains on my death to be made by

Name:
Address:
Contact telephone:
Contact email:

I have/have not discussed this with them.

I have/have not included this information in my Will.

The wishes expressed on the following page are not legally binding.

People who know about this decision:

Name:	Contact details:

Signed: ..... Date: .....

Witnessed by * ..... ADDRESS : .....

PRINT NAME:..... .....

*Not the person responsible for the arrangement .....

After my last breath I would like the arrangements for my body to include:

I do not have particular wishes about:

I have already arranged:

(give contact details if appropriate)