

# MY FUNERAL PLAN



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# This is MY FUNERAL PLAN

*Name* \_\_\_\_\_

Community Legal  
Education Association



L'Association d'éducation  
juridique communautaire

## PART 1: Donation for Medical Education or Transplant

Choose ONE:

I do NOT wish to donate my body — or any part of it — for medical education or transplant.

I wish to donate *my entire body* for medical education or scientific research.

I wish to donate *any part of my body* that can be used for transplant.

I wish to donate *the following parts* of my body for transplant  
(*check off*):

Organs:  heart  kidneys  lungs  bowel  
 pancreas  liver

Tissue:  corneas  skin  heart valves  
 solid bones and joints

## PART 2: Cremation or Earth Burial

*Even if you wish to donate your entire body for medical education, **you must have a backup plan** in case your body is not accepted.*

*This is the first choice you must make:*

I wish my body to be disposed of by:

cremation

earth burial

*If you chose cremation, go to Part 3 (Cremation).*

*If you chose earth burial, go to Part 4 (Earth Burial).*

## PART 3: Cremation

Complete this part **only if** you have selected cremation in **Part 2**.

### A: Type of Service

I wish to have the following type of memorial service or funeral service (*choose ONE*):

- no service of any kind
- a funeral service with my body present, followed by cremation
- immediate cremation, followed by a graveside service
- immediate cremation, followed by a memorial service with my ashes present
- immediate cremation, followed by a memorial service without my ashes present
- other: \_\_\_\_\_

### B: Disposal of My Ashes

I wish my ashes to be (*choose ONE*)

- kept at home
- kept at home until \_\_\_\_\_ and then \_\_\_\_\_  
\_\_\_\_\_
- buried in an urn at \_\_\_\_\_
- put in an urn and then placed in a niche in a columbarium at \_\_\_\_\_  
\_\_\_\_\_
- deposited in the communal ash crypt at \_\_\_\_\_
- scattered at (name the place) \_\_\_\_\_
- other: \_\_\_\_\_

If your choice requires an urn, please indicate on page 12 any particular type of urn you wish to have.

## C: My Grave

Complete this **only if** you have chosen to have your ashes buried.

On my grave, I want (choose ONE)

no marker or tombstone

a flat marker

an upright tombstone

other: \_\_\_\_\_

If you have selected a marker or tombstone, indicate what you want inscribed on it: \_\_\_\_\_

## PART 4: Earth Burial

Complete this Part **only if** you have chosen to be buried in a casket.

I do not want any particular type of casket. The selection may be made by \_\_\_\_\_

I want the following type of casket: \_\_\_\_\_

\_\_\_\_\_

## A: Type of Service

I wish to have the following type of service:

no service of any kind

a traditional funeral service, with my body present, followed by earth burial

immediate earth burial with a graveside service

immediate earth burial, followed by a memorial service

other: \_\_\_\_\_

## B: Burial

I wish my body to be buried at (*name of cemetery*): \_\_\_\_\_

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I wish to have these possessions buried with me (*such as a ring, picture or book*):

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I want my casket (*choose ONE*)

*not* to be placed in a liner or vault

to be placed in a cement liner

to be placed in a sealed vault, made of \_\_\_\_\_

**Note:** *Each cemetery has rules about liners and vaults. You should make sure that your selection is permitted in the cemetery of your choice.*

## C: My Grave

On my grave, I want (*choose ONE*)

no marker or tombstone

a flat marker

an upright tombstone

other: \_\_\_\_\_

If you have selected a marker or tombstone, indicate what you want inscribed on it: \_\_\_\_\_

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**Note:** *Each cemetery has its own rules for liners, vaults, markers and tombstones. You should make sure that your selection is permitted in the cemetery of your choice.*

## PART 5: A Service

Complete this Part **only if** you have chosen to have a service.

I wish the service to be

private, attended only by my immediate family

open to anyone who wishes to attend

other: \_\_\_\_\_

I want the service to be held (*choose ONE*) give the name or location of the place.

in a place of worship

at a funeral home

other (such as at a home, hotel or grave site). Give name or location of the place \_\_\_\_\_

I want the service to be conducted by (*name a person or position*): \_\_\_\_\_

I want the service to include the following (*give details on page 12*):

flowers    music    readings    prayers    eulogy

other \_\_\_\_\_

I prefer (*choose one - or both*)

that flowers be accepted.

that mourners be invited to make donations to the following organizations: \_\_\_\_\_



## PART 6: A Funeral Service – with My Body Present

Complete this Part **only if** you have chosen to have a service with your body present.

I want my body to be placed in

an open casket     a closed casket

I want my body (*choose ONE*)

- to be embalmed
- to be cosmetically restored
- not to be embalmed or cosmetically restored
- not to be exposed to any public or private viewing

I prefer my hair and cosmetics to be done

- by the funeral home
- by these people:

Hair: \_\_\_\_\_ Cosmetics: \_\_\_\_\_

I want my body dressed (*Choose one and give details on page 12*)

- in my own clothing
- in this type of specially purchased clothing
- in a shroud
- in a shroud over this type of clothing (*Give details on page 12*)
- other

### ***Pallbearers***

- I wish to have pallbearers. (*List the names on page 12*)
- I do not wish to have pallbearers.

## PART 7: Costs and Personal Information

**The costs relating to my funeral can be paid from the following:**

- my estate
  - a pre-paid plan
  - insurance
  - bank account
  - Canada Pension Plan
  - other: \_\_\_\_\_
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### **Personal Information**

Information about the above matters and about bank accounts, safe deposit box (and key), real estate, credit cards, income tax records, insurance policies, passport, etc. is located in these places:

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## **Part 8: *Registration of Death***

A ***Registration of Death*** must be filed with Vital Statistics for every deceased person. The following information is required.

Your full name: \_\_\_\_\_

Address: \_\_\_\_\_

Marital status

never married  married  widowed  divorced  separated

Occupation: indicate the kind of work and the kind of business or industry worked in during most of your working life.

\_\_\_\_\_

Manitoba Health Number: \_\_\_\_\_

Social Insurance Number: \_\_\_\_\_

Date and place of birth: \_\_\_\_\_

Your father's full name and place of birth:

\_\_\_\_\_

Your mother's full name, including maiden name, and place of birth: \_\_\_\_\_

\_\_\_\_\_

\* \* \*

I am signing this to confirm that this document contains my instructions on how I want my body to be disposed of. I direct my next of kin and any other person involved in planning my funeral to honour my wishes.

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

## **MORE THINGS TO DO**

*Check off the ones you have done – and then do the rest!*

[ ] I have started to prepare my own obituary.

[ ] I have prepared a list of the names and addresses of relatives, friends, businesses and others to be notified of my death.

[ ] I have discussed my funeral plan with the people who are most likely to arrange my funeral.

[ ] Those people have a copy of my funeral plan or they know where I keep my plan.

## **FOUR IMPORTANT DOCUMENTS**

*A funeral plan is one of four documents that everyone should have.*

**These are the other three:**

**\*A will**, to give instructions on what you want done with your property after you die.

**\*\*A power of attorney (POA)**, to appoint someone to look after your financial affairs if you can't.

**\*\*\*A health care directive** (also known as a living will), to appoint someone to make decisions about your health care if you can't.

A **will** and a **POA** require the expertise of a lawyer, but a one-page form of **health care directive** is available **free** from the government. Call 945-6565 to have a copy sent to you, or download a copy from the government of Manitoba website at: <http://www.gov.mb.ca/health/documents/hcd.pdf>.

## WHAT TO DO WITH YOUR FUNERAL PLAN

1. Consider typing or writing out your plan instead of relying on this form. If you decide to use this form, do NOT remove any pages from it. A missing page can cause confusion.
2. Discuss your plan with *the people most likely to be involved in arranging your funeral*: your funeral plan can be carried out only if those people know about it! Try to obtain their agreement.
3. By law, your Executor is required to carry out your funeral arrangements. Your Executor should have a copy of your funeral plan or know where you keep it.
4. Go to at least one funeral home with your plan and ask for suggestions and a price quotation. If you wish to bury your body or ashes, consult at least one cemetery and one memorial firm. See “Cemeteries” and “Memorials” in the Yellow Pages.
5. Give a copy of your plan to *the people who are most likely to be involved in arranging your funeral* – or tell them where you keep it. It is seldom necessary to give a copy to a funeral home, unless you definitely want that home to be involved with your funeral.



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