

Funeral Plan Information Sheet



Additional Information	Our Ref.	Date (/ /)
Full name	Maiden Name <i>if applicable</i>	
Contact Number		
Address		
Date of Birth	Place of Birth	
Status		
Occupation		
NOK Name		
NOK Tel No		
Doctor		
Spouse or civil Partner Details <i>if applicable</i>	Name	Maiden Name
	Occupation	Retired Yes/No
Clergy/Officiant		
Place of rest		
Dress		
Coffin		
Flowers		
Paper Notice	Donation in lieu of Flowers	
Order of Service		
Burial Instructions	Burial / Cremation (Doctor Fees)	
	Grave No	Grave Owner
<i>Other relevant Information</i>		
Registration Fees	£ 8.00 each	
Golden Charter Fee	£ 285	

