

The Pre-Arrangement Hand Guide  
“What I Want In a Funeral”  
Compliments: Clyde B. Jones Funeral Home Co. Ltd.  
Top Rock  
Christ Church  
Tel 428-9332  
420-3994  
Fax 428-5768  
E-mail:

### **Emergency Guide**

1. In case of emergency, get in touch with us first.
2. The family will be assisted in making all necessary arrangements, and your Pastor, clergyman or religious leader will be notified immediately.
3. In the event of violent or accidental death, the family should telephone us at once advising us about the related circumstances and we will notify the medical examiner as is required by Law.

This Handbook is very important to you or your next of kin. Keep it in a semi- private place where it will be readily available.

### **DO NOT KEEP IN A SAFETY DEPOSIT BOX!**

**Receiving Funeral Director:**

**Address:**

**Telephone No:**

**Vocal Selections:**

- 1.
- 2.
- 3.

**Additional instructions:**

**Clothing:**

**Jewelry:**      Yes                      No

**Type (if required):**

**Glasses :**      Yes                      No

**Other:**

**Checklist**

**Funeral Service Fees**

**Funeral Charges: \$**

- Radio**
- Grave**
- R K B D**
- Flowers**
- Hymn sheets**
- Church Fees**
- Grave Equipment**
- Death Certificates**
- Extra Cars**
- Newspaper- Obituary**
- Radio-Obituary**
- Thank You**
- Condolence book (s)**
- Burial Garments**
- Cards**

**Cemetery Information**

- Cemetery:**
- Section:**
- Lot:**
- Grave:**
- Depth:**
- Bury In:**

**Charges: \$**

**Service Instructions**

**Church Affiliation:**

**Clergy**

**Lodges/ Clubs**

**Service Type :**  
**Residence**

**Church**

**Chapel**

**Date of Service:**

**Time: a.m. p.m.**

**Private: Yes No**

**Flowers Yes No**

**Casket Closed Yes No**

**Casket Style: \_\_\_\_\_ Man: \_\_\_\_\_ Size: \_\_\_\_\_**

**Pall Bearers:**

**Ushers:**

**Obituary**    **Yes**            **No**            **Photo**            **Yes**            **No**

**Cemetery:**

**Lot in name of:**

**Interment**            **Entombment**            **Cremation**

**Ship to (if applicable)**

**Country:**

**I have/ have not made a will.**

**If a will has been made, who is the Executor?**

**A Copy is kept:**

**My Attorney:**

**My Bank is:**

**My Bank Account Number is:**

**Safety Deposit Number is:**

**Location of key:**

**Real Estate Owned:**

**Location of Deeds:**

**My investment Broker is:**

**My insurance advisor is:**

**Location of Insurance Policies:**

**Notify the following companies:**

- 1)
- 2)
- 3)

## Vital Statistics and Historical Data

**Name:**

**Address:**

**City:**

**Country:**

**Telephone:**

**Place of Birth:**

**Date of Birth:**

**Other countries where you resided:**

**Sex:**

**Age:**

**NIS #**

**Occupation:**

**Place of Employment:**

**Marital Status:**

**Single**

**Married**

**Widowed**

**Divorced**

**Spouse of:**

**Parents' name:**

**Date of Death:**

**Place of Death:**

**Physician's Name and Contact information:**

## **Church Service**

### **Hymns in Church**

- 1**
- 2**
- 3**
- 4**
- 5**

### **Hymns at Graveside**

- 1**
- 2**
- 3**
- 4**
- 5**

**Psalm:**

**Lesson:**

### **Pallbearers**

- 1**
- 2**
- 3**
- 4**
- 5**
- 6**
- 7**
- 8**

### **Ushers**

- 1**
- 2**
- 3**
- 4**

**List of Relatives, Friends and their contact numbers to be notified)**