

Civil or Military Honours (e.g. QSM)

.....  
Marriage Celebrant YES / NO

Justice of the Peace YES / NO

Military Service No.....Branch.....

Regiment (or similar) .....

Rank.....

RSA Ceremony Required.....

National Superannuation Number.....

Other Information.....

## FUNERAL ARRANGEMENTS

Funeral Director.....

Minister/Celebrant.....

Flowers/Donations in Lieu.....

Music/Hymns/Readings.....

.....

.....

Burial/Cremation.....

Disposal of Ashes.....

Burial Plot.....

## SPECIAL REQUESTS

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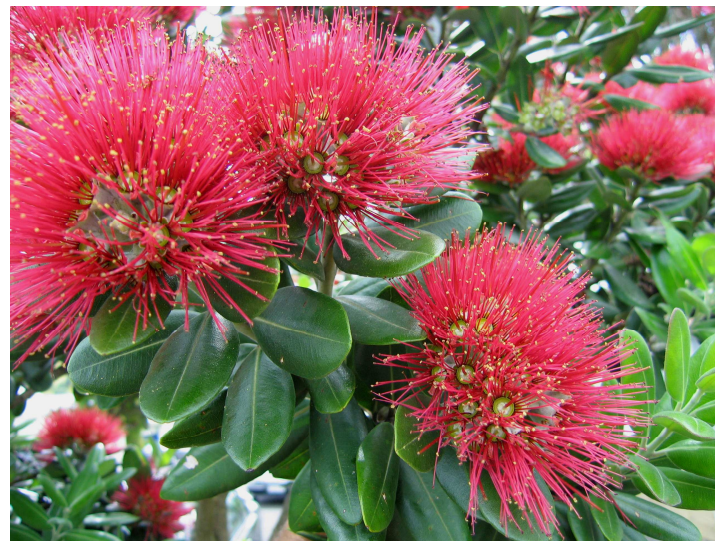
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*This information is for guidance following my death. I have expressed my preferences and wish these carried out unless impractical.*

Signed..... Date.....



## FUNERAL PRE- ARRANGEMENT and PERSONAL RECORD



## ROWLEY FUNERALS

Chapel and Office  
16 Anne Street, Devonport.

Phone (09) 445 9800

[www.rowleyfunerals.co.nz](http://www.rowleyfunerals.co.nz)

**MY FAMILY INFORMATION** (Required by law for registration of death)

First Names.....

Surname.....

Usual Home Address.....

.....

Name at Birth (if different) .....

Sex.....Date of Birth.....

Place of Birth.....

Date of arrival in NZ (if not born here) .....

Occupation (if retired state previous main occupation)

.....

Are you descended from a NZ Maori?                      YES / NO

Ethnic Group.....

Names and Dates of Birth of Daughter (s)

1.....

2.....

3.....

4.....

Names and Dates of Birth of Son (s)

1.....

2.....

3.....

4.....

Mother's Full Name.....

Mother's Maiden Name.....

Mother's Occupation.....

Father's Full Name.....

Father's Full Name at Birth (if different)

.....

Father's Occupation.....

The following details are required even if divorced, separated or partner deceased  
(Use a separate sheet of paper to record further details if necessary) - Circle where appropriate

Married / Civil Union / Union Dissolved / De Facto / Partner Deceased

Separated from De Facto / Permanently Separated / Never in a legal Relationship

	Current	Previous
Age at Union	.....	.....
Place of Union.....	.....	.....
First Names of Partner.....	.....	.....
Surname of Partner.....	.....	.....
Date of Birth of Partner (if living) .....	.....	.....
Gender of Partner	M / F	M / F

**IMPORTANT DOCUMENTS AND INFORMATION**

Solicitor

.....

Address.....

Telephone.....

Location of Will.....

Location of Copies.....

.....

Insurances.....

.....

Location of Valuables.....

.....

Bank Accounts.....

.....

Name of Doctor.....Ph.....

**OTHER INFORMATION**

Community Organisations (e.g. Rotary, RSA, Masonic Lodge) .....

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