

Melton and the Vale Independent Funeral Directors 44 Mill Street Melton Mowbray LE13 1AY

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These are my Funeral V	Vishes, makir	ng arranging my funeral	, less stressful for tho	se left behind.
I (all names in full)		Of (addre	ess)	
			postcod	e
Date of birth	Marital S	StatusOc	CUPATION or if retired, main occupation	
		at these are my wishes for ess and burden on my fa	-	hen the time
Please fill in/delete as ne	cessary. Use	the back of this form or a	nother sheet, for any ad	ditional details.
I would like to be Buried	/ Cremated a	at		
Burial plot details (if bou	ight), or where	e my ashes are to go:		
and I would like to have	my funeral se	us service / my religious ervice held at inist, or by		by a
My chosen music requir		music and/or hymns.		
When everyone enters	Title:	Title:	1	
During the service (up to 3 tunes, 2 recommended)	Title: By:	By:	Title: By:	
When everyone leaves	Title:	By	•	
• • • • • • • • • • • • • • • • • • • •		I would like included in t stated otherwise. Broch		
Details of clothes to be	dressed in, or	gown provided by Fune	ral Director	
Number of limousines to	follow the he	earse		
No flowers / Family flow	ers only / All f	flowers welcome.		
My chosen charity for ar	ny donation m	oney to go to;		
Address for the wake				
Next of Kin name		R	elationship	
Next of Kin address				
			Postcode	
Next of Kin contact phor	ne	Next of Kin en	nail	
into their care at their ea	arliest conveni n to put them a	elton and the Vale Indep ience and commence the at ease. They now know	ese funeral arrangeme	nts. I have
Signatui	re:	Dat	ə:	