



RowlandBrothers
Independent Funeral Directors

Advanced Care Planning My Personal Wishes

NAME

www.rowlandbrothers.com

Croydon 020 8684 1667	Purley 020 8660 5547	Old Coulsdon 01737 555 202
Warlingham 01883 623 067	New Addington 01689 842 046	Beddington 020 8681 2001

Advanced Care Planning

My Personal Wishes

Your Details

Section 1

Personal Wishes & Requirements

I may change my mind, but near the end of my life, I would like the following people to be involved: i.e. Family, Friend, Carer etc.

Name

Relationship

Home Phone

Work Phone

Mobile

Address

Post Code

I would like them to know I am dying and say my goodbyes

YES

NO

I would like them to be with me when my life draws to a close

YES

NO

Name

Relationship

Home Phone

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I would like them to be with me when my life draws to a close

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NO

I would like the following to be around me (e.g. Photographs, Flowers, Mementos etc):

I would also like the following:

Music	
Hymns and/or Prayers	
Personal Contact	(e.g. Hand Holding)
Massage / Aromatherapy	
Personal Care	(e.g. Hair, Nails)
To leave my room	(e.g. visit my family, go into the garden or lounge)

I would like to wear the following:

In Bed	
Out of Bed	
When I have Visitors	

I would like my religious / spiritual wishes to be met by:

Section 2 Existing Arrangements

Have you made a Will?

If YES, please provide the name of your Executor(s):

If YES, please provide the name of your Solicitor/Will Writer

If NO, would you like further information on making a Will?	<input type="text" value="YES"/>	<input type="text" value="NO"/>
Have you given somebody Power of Attorney to look after your Health & Welfare?	<input type="text" value="YES"/>	<input type="text" value="NO"/>
Have you given somebody Power of Attorney to look after your Property & Financial Affairs?	<input type="text" value="YES"/>	<input type="text" value="NO"/>
If NO, would you like further information about arranging Power of Attorney?	<input type="text" value="YES"/>	<input type="text" value="NO"/>

Do you have a pre-arranged Funeral Plan?

If YES, please provide details:

If NO, would you like further information on arranging a pre-arranged Funeral Plan?

If NO, my preferred Funeral Director is:

The Person I would like to arrange my funeral is:

Section 3

Should I not already have arranged my funeral, I would like the following

A traditional funeral

A Green Funeral

To be Buried or Cremated

Where would you like to be Buried/Cremated?

Cremated remains instructions

Flowers

Donations

Music

Hymns

Readings / Poems

To wear

To leave from

To take with me (e.g. Photo, book etc)

Section 4

Any other information:

Section 5

Your signature

Your Signature

Date

Witness Signature

Date

Witness Name