

## **Zylka Funeral Home Pre-Planning Form**

Please complete the form by entering the requested information in the fields below - click inside each field to enter text or select using the input elements provided. Once completed, you may either e-mail it to us at [zylkafuneralhome@verizon.net](mailto:zylkafuneralhome@verizon.net), or you may print the form out and bring it with you to the arrangement conference.

### **↻ Information about the person completing this form: ↻**

**I am Planning For:**

**Last Name:**

**First Name:**

**Middle:**

**Street Address:**

**City:**

**State:**

**Zip:**

**County:**

**Phone:**

**E-mail:**

### **↻ Vital Information about the person you are planning for: ↻**

**Last Name:**

**First Name:**

**Middle:**

**Gender:**

**Marital Status:**

**Social Security #:**

**Date of Birth:**

**Place of Birth:**

**Spouse's Full Name:**

**Spouse's Maiden Name:**

**Place of Marriage:**

**Date of Marriage:**

**Mother's Name:**

**Mother's Maiden Name:**

**Father's Name:**

## 🎨 Work and Education 🎨

**Education (Primary):**

**College (1 – 5+):**

**Usual Occupation (most of life):**

**Kind of Business:**

**Company:**

## 🎨 Military Records 🎨

**Branch of Service:**

**Serial Number:**

**Date Enlisted:**

**Rank at Discharge:**

**Date discharged:**

**Discharge on file at:**

**Copy of discharge papers?:**

**Name of Wars:**

## 🎨 Funeral Service Information 🎨

**Place of Service (Choose one):**

**Name of Funeral Home:**

**Address:**

**Phone:**

**Place of Visitation:**

**I prefer the funeral service to be:**

**Viewing for Family?:**

**Viewing for Friends?:**

**Religious Denomination:**

**Place of Worship:**

**Lodge/Union:**

**☞ Person(s) to Finalize Arrangements at Time of Death ☞**

**Check here and skip this section if information is the same as person filling out this form**

**Full Name:**

**Street Address:**

**City:**

**State:**

**Zip:**

**Phone:**

**☞ Special Instructions ☞**

**Flower Preference:**

**Music:**

**Casket Bearers (6):**

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

**Jewelry:**

**Glasses:**

**Clothing:**

**Other:**

## ✧ Disposition Options ✧

**I prefer:**

**Cemetery:**

**Address:**

**Phone:**

**Section:**

**I have made a last will and testament:**

## ✧ Other Information and Special Instructions ✧

**Please list any other instructions or information you would like us to have:**

## ✧ Memorials & Charities ✧

**Please list any Memorials or Donations to Charity that you would like:**