

Community for Interfaith Celebration  
Olympia, Washington

MEMORIAL REQUEST

The purpose of this form is to record your wishes regarding your own memorial service.  
Please feel free to add any additional information not specifically requested by this form.

Name:

Address:

Phone:

Date of Birth:

Today's Date:

I (do/don't) want a memorial service through CIC.

- Instead of a service, I would like my death to be acknowledged in the community in the following way: (e.g., Wavelinks, candles at celebration)

(Yes, I do/No, I don't) plan to have a service (in addition to/instead of) a CIC memorial

graveside (burial)

cremation

funeral/memorial service at:

other:

The following person will be organizing that service (name and address):

(Yes I do, No I don't) want to invite CIC members to this additional service (specify names if not all-inclusive)

**STOP** if you do not want a CIC memorial service. Continue if you do.

*CIC Memorial Request Form, continued*

I (do/do not) want my memorial service to be open to the entire CIC community. I want the CIC community to be informed of my memorial service through:

- Obituary
- Wavelinks
- Phone Tree
- Other

My next of kin is (give name, address, and phone number)

The people who will be involved in planning my service are:  
(Give name, address, phone)

Specific people to invite outside of CIC (family, work, neighbors, other):

I have asked (name, phone) to handle invitations.

**Details of CIC memorial:**

I want (name) to preside/facilitate

Where? (church, park, home, funeral chapel, cemetery, other)

When? (i.e., evening, daytime, weekend or weekday, proximity to death date)

(In the next section, list specific musicians, readers, etc; include text of readings, songs, etc., as attachments. In what order do you want things to happen? Number 1 through...?)

Music/Songs/Chants

Meditation

Dances

Readings (prayers, poetry, etc.)

I have/have not) written a (statement\_\_ biography\_\_ other\_\_) to be read at the service.  
(Please include text.) I would like (name) to read it.

*CIC Memorial Request Form, continued*

I (would/would not) like to have additional speakers (e.g., to tell stories, share memories, etc.; specify names)

For the following, indicate yes or no; include more detail if applicable.

--I (do/don't) want my remains (body or ashes) to be present at the service  
Open or closed casket?

--Photos or other memorabilia on display at the service? (Specify what, where they can be found)

--Photos or videos taken at the service?  
Give to:

--Flowers?

--Food? Catered or potluck?

--Child care during service?

Additional comments on style, content, and length of service:

Suggestions for memorial donations or gifts: (charities, flowers, contributions to funeral/burial costs, medical bills, children's college fund etc)

**Do you need additional support for family or significant others?**

Food?

Transportation?

Place to stay for out-of-town friends, relatives?

Child care?

Financial help?

I have asked the following person to coordinate these needs (name and contact information):

I (do/don't) anticipate opposition from family members regarding my wishes. I have planned for this by:

Have we forgotten anything? Is there anything else we need to know?

Please make copies of the completed memorial request to keep with your personal papers and to distribute to next of kin and/or other family members/significant others who may be involved in planning your service. Please return two copies to CIC.

You are free to update this form at any time.