

Funeral Arrangement Form

Funeral instructions prepared by:

Phone: Email:

Address:

This funeral arrangement is for: Myself Someone Else. If someone else, state your relationship with them:

Personal details This information will be used to obtain your New Zealand Death Certificate.

Title: (if applicable) Master Mr. Sir Miss Mrs. Ms. Dr. Official Titles:

First names:

Surname: Surname at birth: (if applicable)

Address:

Phone: Email:

Birth date: Birth place: Gender: Male Female

If birth place is in another country, what year did you arrive in New Zealand?

Occupation: (before retirement) Ethnic group(s):

Relationship status at passing: Married Never married Partnered or de facto Widowed
 Civil union Separated from marriage/civil union Marriage dissolved

Marriage details

Spouse's full name:

Spouse's maiden name: (if applicable) Spouse's age today: Your age at marriage:

Place of marriage: Marriage status:

Spouse's full name: (2nd marriage, if applicable):

Spouse's maiden name: (if applicable) Spouse's age today: Your age at marriage:

Place of marriage: Marriage status:

Spouse's full name: (3rd marriage, if applicable):

Spouse's maiden name: (if applicable) Spouse's age today: Your age at marriage:

Place of marriage: Marriage status:

Childrens' details

Ages of living children:

Birth date & age of each daughter: / / /
/ / / /

Birth date & age of each son: / / /
/ / / /

