



Hospice

and Palliative Care of Greensboro

# WISHES FOR MY FUNERAL

Funeral:

Viewing:

Memorial service:

I WOULD LIKE MY SERVICE TO BE HELD AT:

Name

Address

Funeral home:

Church:

Memorial society:

Other:

2500 Summit Avenue  
Greensboro, NC 27405  
336.621.2500 phone  
336.621.4516 fax  
[www.hospicegso.org](http://www.hospicegso.org)



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## I WOULD LIKE TO BE:

BURIED

Name

Address

I have a plot at:

I would like my casket to be:

Wood  Bronze  Metal  Other:

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CREMATED

Name

Address

I wish to have my  
ashes scattered at:

I wish to have my  
ashes go to:

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ENTOMBED

Name

Address

I have a burial vault at:

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MY BODY  
DONATED TO  
MEDICAL SCHOOL

Name

Address

---

OTHER:

Name

Address

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## ADDITIONAL WISHES:

Music choices:

Readings:

Flowers:

Special Instructions:

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