

# TROUTMAN

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# FUNERAL HOME

## Preplanning Information Sheet

Thank you for your interest in preplanning. Please complete as much information below as you are comfortable with providing. We will keep the information securely in our files.

### PERSONAL INFORMATION:

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_

Cell Phone Number: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Birth Date (MM/DD/YYYY): \_\_\_\_\_

Birthplace (City/State): \_\_\_\_\_

Occupation: \_\_\_\_\_

Veteran (Yes or No): \_\_\_\_\_

If "yes," which war? (WWII, Korean, Vietnam, Iraq, etc.): \_\_\_\_\_

Marital Status: \_\_\_\_\_

Full Name of Spouse: \_\_\_\_\_

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### FAMILY INFORMATION:

Father's Full Name: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_

Name(s) of Son(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name(s) of Daughter(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name(s) of Sister(s): \_\_\_\_\_

\_\_\_\_\_

Name(s) of Brother(s): \_\_\_\_\_

\_\_\_\_\_

Name(s) of Grandchild(ren): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name(s) of Great-Grandchild(ren): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name(s) of Step-Child(ren): \_\_\_\_\_

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**PREFERENCES:**

Burial or Cremation: \_\_\_\_\_

Place of Funeral: \_\_\_\_\_

Officiating Minister: \_\_\_\_\_

Bible Passage Selections: \_\_\_\_\_

\_\_\_\_\_

Poetry Selections: \_\_\_\_\_

Music Selections: \_\_\_\_\_

Place of Burial or Disposition of Cremains: \_\_\_\_\_

Items to be Removed (i.e., jewelry, glasses): \_\_\_\_\_

Casket (if known): \_\_\_\_\_

Vault (if known): \_\_\_\_\_

Pallbearers: \_\_\_\_\_

Memorials: \_\_\_\_\_

Education (for death certificate): \_\_\_\_\_

Special requests: \_\_\_\_\_

Would you like to be contacted by Troutman Funeral Home to discuss your options? \_\_\_\_\_