

New Covenant United Methodist Church
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LIFE INVENTORY

What happens when we die? Often family members have to go scrambling for vital information. When the Pastor sits down with family members to plan for the service of the deceased, they often wish that their loved one had written down some information that would be helpful. This information will be confidentially retained by the Pastors, and it can be very helpful at the time of death. Everyone in our congregation is invited to fill out this form and leave or mail it to the church. Copies will be made available to family members upon request. There is nothing legally binding about this information, and it is not intended to be an official will.

Please take the time now to fill this inventory out. Additional Forms are available.

In the event of my death, I want to make the following Life Inventory Information available to my family and Pastors.

Name: _____ Phone: () _____

Current Address: _____ City _____ ST ____ ZIP _____

Birth Date: _____ Place of Birth _____

My Spouse (if married) or significant other _____

My Children: _____ ; _____ ; _____

_____ ; _____ ; _____

Please Contact: _____ ; Phone _____ ;

Address _____

My Parents: _____

My Siblings _____

Occupation (even if retired): _____

If Possible I would prefer: ___ Funeral (with body present) ___ (closed casket?) ___ (viewing of body)

___ Memorial service (with body not present)

___ Other (explain) _____

I prefer service to be held at: ___ Church & Location (if out of town, give address/phone #) _____

___ Funeral Home & Location _____

___ Grave Site & Location _____

Disposition of my Body: _____ Burial _____ Cremation: _____ Medical Research

My Favorite Hymn(s) _____
_____ (over)

Special Music: _____

Scripture verses that have given me strength and comfort: _____

I consider my most important accomplishments in life to have been: _____

If anyone should care to designate a gift in my memory, I would prefer that it be given to: _____

I (have made) (have not made) (want to make) a specific bequest to New Covenant United Methodist Church in my will.

I (have) (have not) completed the Five Wishes[®] packet

For Detailed Funeral Instructions

It would be helpful to the pastor if you would share personal testimony of Jesus Christ for use in the memorial address, and other special procedures that you want followed. (Attach additional sheet if necessary).

Note: Do not place this information in you safety deposit box as it may be inaccessible. Have your family retain one copy, send one copy to the funeral home and one copy to the church.

Date: _____ Signature: _____

Witness (if desired): _____