



Date: \_\_\_\_\_

FUNERAL & CREMATION SERVICE

9293 Eastman Park Drive  
Windsor, CO 80550  
970.686.9525

# VITAL STATISTICS

(Required by State of Colorado)

Legal Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Birthplace (City & State): \_\_\_\_\_

Veteran:  Yes  No Branch of Service: \_\_\_\_\_

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

Residence: State: \_\_\_\_\_ County: \_\_\_\_\_ City: \_\_\_\_\_

Street Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Hispanic Origin:  Yes  No Race: \_\_\_\_\_ Number of Years of Education: \_\_\_\_\_

Parents: Father: \_\_\_\_\_ Mother (Maiden Name): \_\_\_\_\_

Wife (Maiden Name) \_\_\_\_\_

Informant (person supplying information): \_\_\_\_\_ Phone: \_\_\_\_\_

Attending Physician (Name & Address): \_\_\_\_\_

## PERSONAL INFORMATION

(Instructions for My Family)

*In the event of my death, I wish to have the following instructions followed:*

I choose:  Burial  Cremation

### Type of Service:

#### Burial Services

- Funeral Celebration with Visitation and Burial
- Graveside Service with Visitation
- Simple Burial with No Service or Visitation
- Funeral Celebration with Burial and No Visitation
- Graveside Celebration with No Visitation

#### Cremation Services

- Memorial Celebration with Visitation & Cremation
- Memorial Celebration with Cremation
- Simple Cremation with No Services
- Visitation Only with Cremation Following
- Simple Cremation/Graveside Services

Place of Service:  Funeral Home  Church  Cemetery

Service to be held at: \_\_\_\_\_

Name of Cemetery: \_\_\_\_\_

Instructions for my Urn/Ashes: \_\_\_\_\_

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

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

Pallbearers or Honorary Pallbearers: \_\_\_\_\_

Favorite Flowers: \_\_\_\_\_

# BIOGRAPHICAL OBITUARY INFORMATION

(some information optional)

Date: \_\_\_\_\_

**Obituary Name:**  
(Include Nicknames) \_\_\_\_\_

**Marriage History:**  
 Not Married  Married  Divorced Maiden Name: \_\_\_\_\_  
Where Married: \_\_\_\_\_ Date: \_\_\_\_\_

**Residence History:** \_\_\_\_\_  
Most Recent Residence: \_\_\_\_\_ Since: \_\_\_\_\_  
Other Residences & Dates: \_\_\_\_\_  
\_\_\_\_\_

**Education:**  
High School: \_\_\_\_\_ Colleges/Degrees: \_\_\_\_\_

**Employment History:** \_\_\_\_\_  
\_\_\_\_\_

**Church/Civic Organizations/Hobbies, Etc:** \_\_\_\_\_  
\_\_\_\_\_

**Surviving Relatives:** (Please list Names, City and State of Residence)

**Spouse:** \_\_\_\_\_

**Parents:** \_\_\_\_\_

**Children:** \_\_\_\_\_

**Siblings:** \_\_\_\_\_

**Number of:** Grandchildren \_\_\_\_\_ Great-Grandchildren \_\_\_\_\_ Great-Great Grandchildren \_\_\_\_\_

**Preceded in Death by** (List immediate relatives by name and relationship only) \_\_\_\_\_