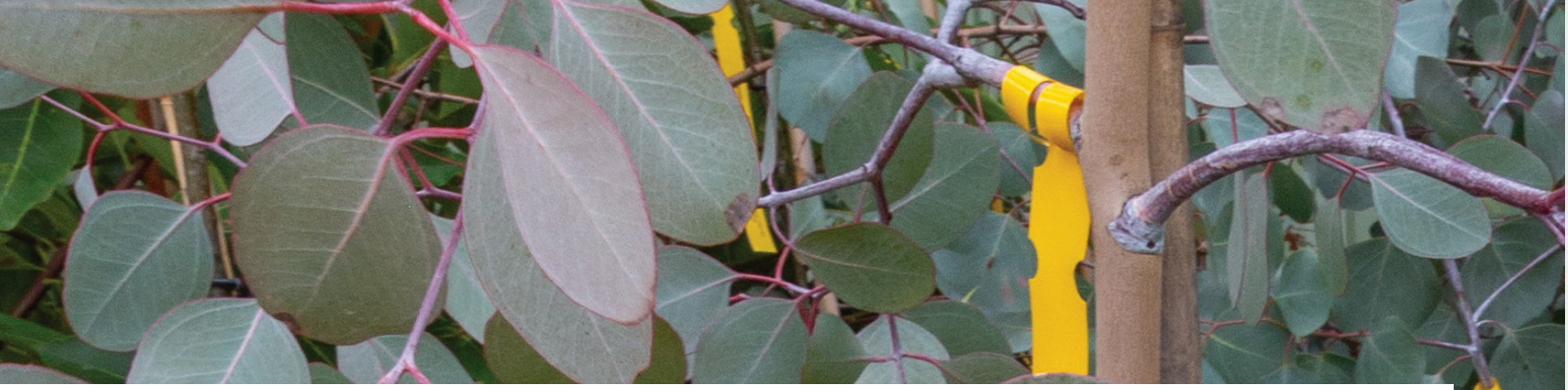
My Story, My Wishes

Shared with love, for now and later.

Maroondah City Council



Every life tells a story worth sharing.

This booklet invites you to reflect on the moments, people and experiences that have shaped your journey, while also helping you record the practical details and wishes that will guide others when the time comes.

While this is not a legally binding document, it is a meaningful way to clearly express your preferences and provide guidance to those closest to you.

More than a document, this is a chance to celebrate your life- your achievements, your relationships, your values and the memories that matter most.

By capturing this information, you are helping your loved ones honour you in a way that feels true to who you are. It is a thoughtful and generous act that can bring comfort, connection and understanding during times of change.

You may wish to review this booklet from time to time and update it as your circumstances, wishes or life experiences change. It is also important to ensure that your executor and close family members are aware of where this document is stored.

Take your time, tell your story in your own way, and know that this is something truly meaningful – for you and for those you care about.

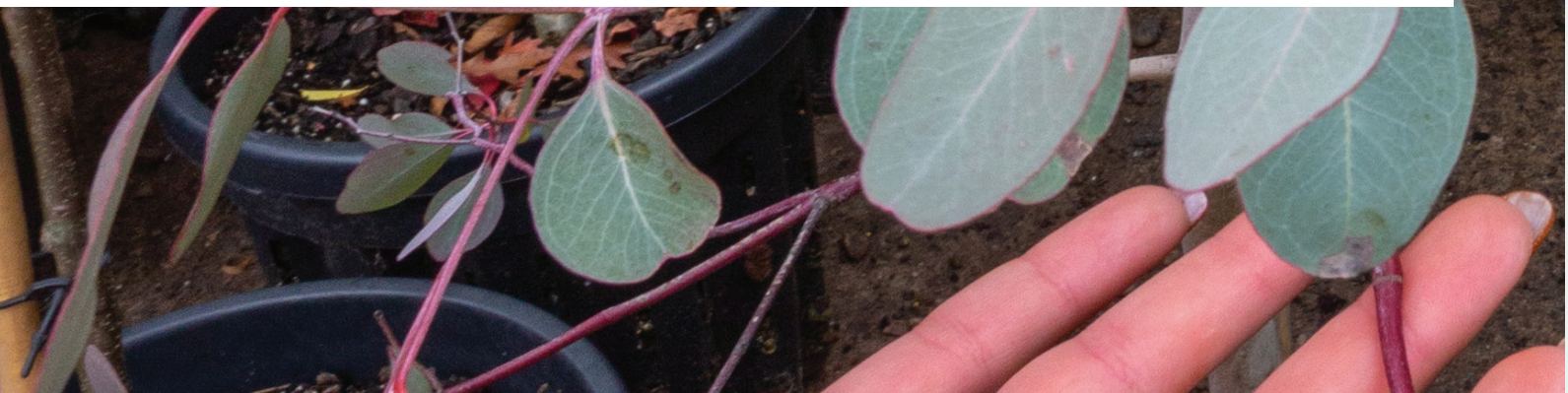
More copies of this booklet are available by contacting Maroondah City Council's Positive Ageing Team on 1300 88 22 33 or via email at positiveageing@maroondah.vic.gov.au

Maroondah City Council sincerely thank the Southern Metropolitan Cemeteries Trust for their collaboration in providing this book for Maroondah residents to record directions for their loved ones.

SOUTHERN METROPOLITAN CEMETERIES TRUST

Honouring and celebrating life

For more information, please visit Southern Metropolitan Cemeteries Trust at **smct.org.au**



Created by: _____

Date: _____

Personal details

Title: ☐ Dr ☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Other _____

Surname: *(family name)* _____

Given name(s): _____

Maiden name: _____

I was named after: _____

Gender: ☐ M ☐ F ☐ Prefer not to say ☐ Self describe _____

Date of birth: _____

Place of birth: *(suburb, state, country)* _____

_____

_____

_____

If born overseas, date of arrival in Australia: _____

Are you of Aboriginal or Torres Strait Islander origin?

☐ Yes ☐ No

If yes:

Mob _____

Language _____

Contact details

Home phone: _____

Mobile phone: _____

Email address(s): _____

Home address: *(suburb, state, p/code, country)* _____

_____

_____

_____

PO Box: *(if applicable)* _____

Are you retired? ☐ Yes ☐ No

Are you receiving a pension? ☐ Yes ☐ No

Pension type: ☐ Centrelink ☐ Veterans ☐ Affairs

Pension number: *(if applicable)* _____

Veterans Card/Reference number: _____

My story

A note to the author

The following section provides the opportunity for you to describe your life in your own words and to explain what is important to you. This will serve as a wonderful record for future generations and will provide valuable information for your eulogy.

Details of where I grew up: _____

Some of my earliest memories: _____

School years: _____

My occupation(s): _____

My hobbies and special interests: _____

My involvement in clubs/community groups includes:

☐ Lions ☐ Rotary ☐ RSL ☐ Sport club(s)

Other: _____

Details: _____

_____

_____

Something that most people don't know about me: _____

_____

_____

_____

_____

_____

Some of my life accomplishments: _____

_____

_____

_____

_____

_____

_____

Some of my proudest moments:

The best times I ever had:

The most important people in my life:

My parents

My mother

Mother's given name(s): _____

Mother's surname: _____

Mother's maiden name: _____

Other names my mother was known by: _____

Occupation: _____

Favourite memory: _____

My father

Father's given name(s): _____

Father's surname: _____

Other names my father was known by: _____

Occupation: _____

Favourite memory: _____

Other significant carers

_____

_____

Relationship: _____

_____

My significant relationships

Relationship status

☐ Married ☐ Widow/er ☐ Divorced ☐ Never married ☐ De facto

Was this registered with Victorian Registry of Births, Deaths and Marriages? ☐ Yes ☐ No

Relationship/marriage (current)

Given name(s) of spouse/partner: _____

Surname of spouse/partner: *(birth name)* _____

Place of marriage/ceremony: *(if applicable: suburb, state, country)* _____

_____

Date of marriage/ceremony: *(if applicable)* _____

How we met: _____

Relationship/marriage (2)

Given Name(s) of spouse/partner: _____

Surname of spouse/partner: _____

Place of marriage/ceremony: *(if applicable: suburb, state, country)* _____

_____

Date of marriage/ceremony: *(if applicable)* _____

How we met: _____

_____

Relationship/marriage (3)

Given name(s) of spouse/partner: _____

Surname of spouse/partner: *(birth name)* _____

Place of marriage/ceremony: *(if applicable: suburb, state, country)* _____

_____

Date of marriage/ceremony: *(if applicable)* _____

How we met: _____

_____

_____

Relationship/marriage (4)

Given name(s) of spouse/partner: _____

Surname of spouse/partner: *(birth name)* _____

Place of marriage/ceremony: *(if applicable: suburb, state, country)* _____

_____

Date of marriage/ceremony: *(if applicable)* _____

How we met: _____

_____

_____

_____

My children

Provide details of each child in order of birth *(from eldest to youngest)*.

1. Child's given name(s): _____

DOB: _____ From my relationship with: _____

2. Child's given name(s): _____

DOB: _____ From my relationship with: _____

3. Child's given name(s): _____

DOB: _____ From my relationship with: _____

4. Child's given name(s): _____

DOB: _____ From my relationship with: _____

5. Child's given name(s): _____

DOB: _____ From my relationship with: _____

My grandchildren and great-grandchildren

_____

_____

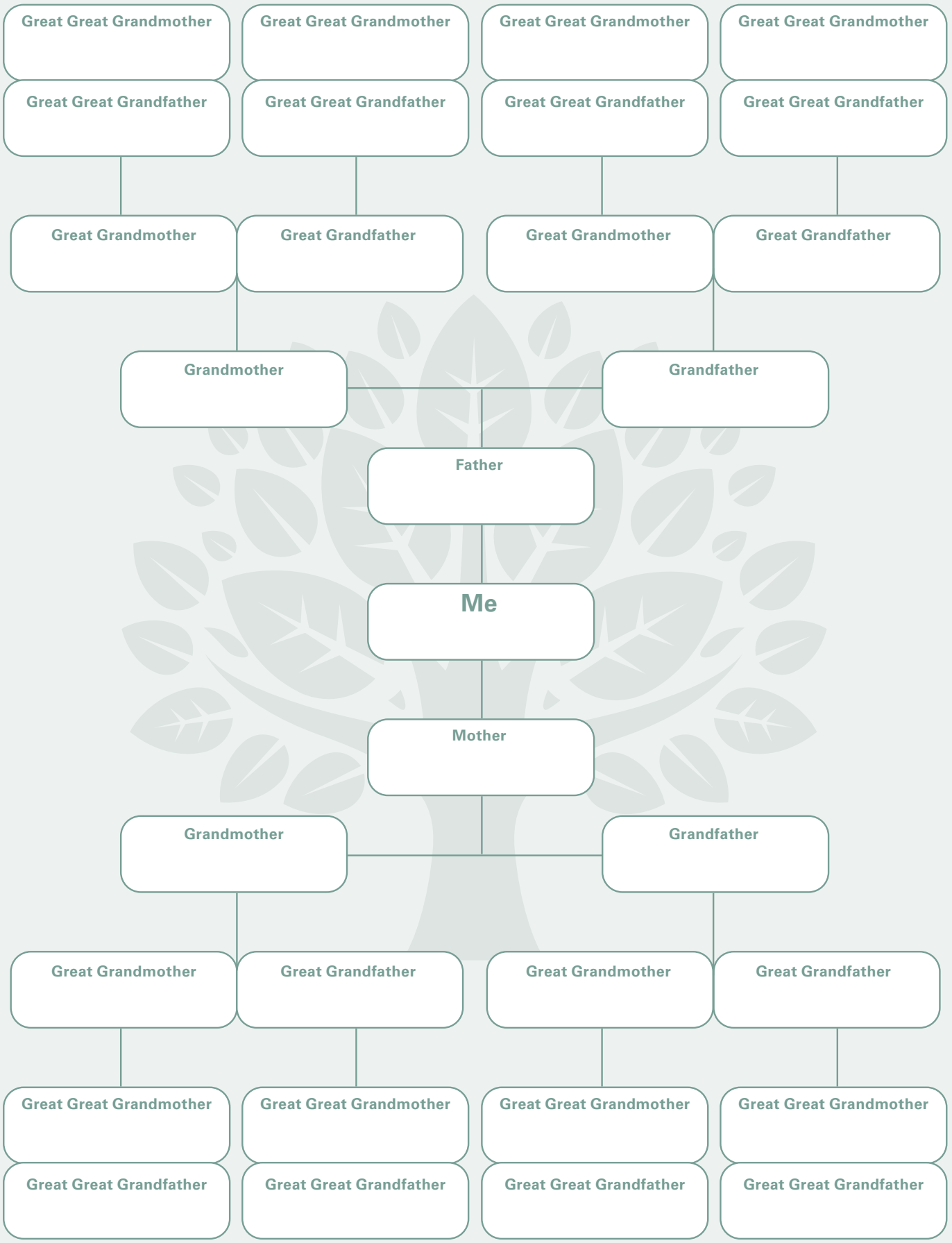
_____

_____

My grandchildren call me: _____

_____

My Family Tree



People to be notified

Name of responsible person(s) after your death: _____

_____

Address of this person(s): *(suburb, state, p/code, country)* _____

_____

Contact numbers: _____

Is this person your Executor? ☐ Yes ☐ No

If not, name and details of Executor: *(suburb, state, p/code, country)* _____

_____

Next of kin

Name(s): _____

Address: _____

Home phone: _____ Mobile phone: _____

Solicitor

Name(s): _____

Address: _____

Home phone: _____ Mobile phone: _____

People/clubs/associations

_____

Public notices

I would like a death notice placed in:

☐ The Age

☐ The Herald Sun

☐ Other *(please specify)* _____

I would like a funeral notice placed in:

☐ The Age

☐ The Herald Sun

☐ Other: *(please specify)* _____

☐ I would like my funeral to be private and therefore no death/funeral notice to be placed.

You can set up a Legacy Contact to grant someone access to your Google/Apple account data after your death or if you become incapacitated.

Designating a Legacy Contact helps ensure:

- Your digital legacy is handled according to your wishes.
- Loved ones can access memories. *(photos, posts, etc.)*
- Prevents data loss or misuse after you're gone.
- To help manage things after I'm gone, I have chosen: _____ as my Legacy Contact.

Location of Will

My Will is located at: *(please provide full details)* _____

_____

_____

_____

Location of additional documents

Please indicate where the following documents are kept or write 'with my Will.'

- Certificate of birth: _____
- Certificate of marriage: _____
- Childrens' birth certificates: _____
- Pre-arranged funeral documents: _____
- Cemetery or cremation certificates: _____
- Financial documents: *(eg. bank books, share certificates, certificate of title, insurance policy)* ___

_____

_____

_____

_____

Are you an organ donor? ☐ Yes ☐ No

Desired arrangements

I wish to be: ☐ Buried ☐ Cremated

I wish to be buried/cremated at: *(please state cemetery/crematorium)* _____

_____

_____

_____

Please place my cremated remains at: *(cemetery/memorial park location, other)* _____

_____

_____

_____

Desired funeral service: *(you may tick more than one)*

☐ Cemetery chapel/reflection space ☐ Graveside ☐ Church

☐ Funeral ☐ Chapel ☐ RSL involvement ☐ Lodge involvement

☐ Other

Address: *(suburb, state, p/code, country)* _____

_____

_____

_____

_____

Burial or cremation arrangements

Pre-arranged grave or cremation certificate:

☐ Pre-paid or family grave ☐ Cremation certificate

Name of Cemetery or Memorial Park: _____

Grave location: *(if applicable)* _____

Name of Certificate holder: _____

Pre-arranged funeral details:

Has money been paid toward the pre-arranged funeral? ☐ Yes ☐ No

If "Yes", complete the following details.

Funeral contract number: _____

Document located at: _____

_____

Amount paid: _____ Date paid: _____

Flowers

Floral tribute

I would like my floral tribute to include the following flowers: *(eg colour/variety)* _____

_____

Guest's flowers

☐ Yes ☐ No

In preference to flowers, I would prefer that donations be made to the following charity:
(please specify)

_____

Clothing

I would like to be dressed in the following clothes: _____

_____

_____

_____

I would like guests to wear: _____

_____

_____

Music

I would like:

☐ Recorded music ☐ Organist ☐ Vocalist ☐ Piper

☐ Other *(please specify)* _____

I would like the following songs/music played: _____

_____

_____

_____

Because: _____

Additional requests for my service: _____

_____

_____

_____

_____

_____

_____

_____

_____

Personal acknowledgments

Please acknowledge the following on my behalf: *(people/clubs/associations)* _____

_____

_____

_____

_____

_____

_____

Please read these words during my service: *(eg poem/letter)* _____

_____

_____

_____

_____

_____

These words are special because: _____

Please display the following personal items:

☐ Medals ☐ Art/craft work ☐ Photographs ☐ Sporting items

☐ Other *(please specify)* _____

Estate information

To help locate your accounts, consider providing details including:

- Bank/building society
- Investments
- Mortgage
- Hire purchase agreements
- Bank/credit cards
- Insurance policies
- Superannuation
- Life insurance
- Health/medical benefits
- Medicare
- Drivers licence
- Computer/email/ social media

Account name/description	Institution and BSB, account number/ reference number/password

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for now and later.

Estate Information

I have completed this document in order to help my family with my estate and to assist in the preparations for my funeral service. I respectfully request that my wishes are honoured.

Name:

Signature:

Date:

Notes: _____

_____

_____

_____

_____

Maroondah City Council

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mcc1634-Apr26