



NEW COVENANT
UNITED METHODIST CHURCH

LIFE INVENTORY

At the time of our passing, family members must attempt to locate vital information. When a Pastor sits down with family members to plan for the service of the deceased, the families often wish that their loved one had written down some information to assist in the planning process. This information contained in this Life Inventory Form will be retained by the Care Ministry of New Covenant, and it can be very helpful to the family and the Pastor at the time of death. Everyone in our congregation is invited to fill out this form, return it to the Care Office 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 complete this form. Additional Forms are available in the Care Office as needed.

In the event of my death, I want to make the following Life Inventory Information available to my family and Pastor(s).

Name: _____ Phone: _____

Current Address: _____

City: _____ ST: _____ ZIP: _____

Birth Date: _____ Place of Birth: _____

Spouse (if married) or Significant Other: _____

My Children:

_____ ; _____ ; _____

_____ ; _____ ; _____

Please Contact: _____ **Relationship:** _____

Phone: _____ **Address:** _____

My Parents: _____

Siblings _____

Occupation (even if retired): _____

Military Service, including Branch and Rank: _____

Celebration of Life Service Preference:

___ 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 other than NCUMC, please list name, address and phone)

_____ Funeral Home (list name, address and phone)

_____ Grave Site & Location _____

_____ Columbarium & Location _____

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

My Favorite Hymn(s)

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

Additional Detailed Instructions

To assist the pastor, please share your personal testimony of Jesus Christ for use in the memorial service, as well as other special procedures that you want followed. (Attach additional sheets if necessary).

Note: Do not place this information in your 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.

Signature: _____ Date: _____

Witness (if desired): _____