

BRAGDON-KELLEY FUNERAL HOMES

Pre-Need Planning Form

Name _____
First Birth Given Middle Last

Residence _____
Street Address

City, State Zip _____

Social Security Number _____

Birthplace _____

Date of Birth _____

Marital Status Married Widowed Divorced

Name of Spouse _____

Education _____
Highest grade completed (0-12) / College (1-4 or 5+)

Father _____
First Birth Given Middle Last

Mother _____
First Birth Given Middle Last

Ancestry _____
Specify English, French, German, Etc... or combination thereof

Veteran of US Military Service Yes No

Occupation _____
Specify Homemaker, English Teacher, Electrical Engineer, Etc...DO Not USE RETIRED

Kind of Business _____
Specify At Home, Elementary Education, Telecommunications, Etc...

Name of Employer _____
List name company where employed for the longest period of time

Name of Informant _____
Name of person providing information on the Death Certificate

Mailing Address _____

Cemetery _____
List name and location of cemetery where burial will be or urn will be interred

Additional Information for Newspapers (if desired)

Names of surviving family members and their residences

Children _____

Number of grandchildren _____

Number of great-grandchildren _____

Siblings _____

Schools attended & years of
graduation _____

Clubs and memberships _____

Years living at current residence _____

Prior residence _____

Omit Flowers Yes No

If desired memorial donations
may be made to _____

