

# KENYON FUNERAL HOME

## *Pre-Planning Guide*

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

Full name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Father's name: \_\_\_\_\_

Mother's name and maiden name: \_\_\_\_\_

Education: \_\_\_\_\_

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

Marital status: \_\_\_\_\_

Veteran Yes/No

Honorable discharge available: yes \_\_\_\_\_ no \_\_\_\_\_

Next of kin

Name: \_\_\_\_\_

Address : \_\_\_\_\_

Phone number: \_\_\_\_\_

Type of service      Funeral \_\_\_\_\_      Cremation \_\_\_\_\_

Cemetery: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\* For security reasons, we have not included on this form the request for some info that is necessary for our files. We will request that info via phone or in person when we receive this form.

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