

THE PROGRESSIVE JEWISH COMMUNITY OF EAST ANGLIA
PREFERENCES (expressed before death) for FUNERAL ARRANGEMENTS

PLEASE WRITE CLEARLY AND IN BLACK INK

YOUR DETAILS

SURNAME: HEBREW NAME:

FIRST NAMES (ALL):

DATE OF BIRTH: FATHER'S NAME (English and Hebrew):
.....

MOTHER'S NAME (English and Hebrew):
.....

ADDRESS:

TELEPHONE NUMBER:

WHO WILL BE RESPONSIBLE FOR SETTLING THE UNDERTAKER'S ACCOUNT?

.....

OTHER SYNAGOGUE AFFILIATIONS

Are you a member of another synagogue (delete as applicable)? Yes/No

If so then which one?

Does that synagogue have a burial scheme to which you subscribe and, if so, what expenses does that scheme cover?
.....

DETAILS OF NEXT OF KIN

NAME:

ADDRESS:

TELEPHONE NUMBER:

The following are to be informed in the event of death:

NAME: Tel:

NAME: Tel:

MY WILL

My will is held by (name, address, tel number)
.....

The executor(s) of my will is/are (name, address, tel number)
.....

Information recorded by:

Date information recorded:

For office use only

Full membership status confirmed: Yes/No

Jewish status confirmed? Yes/No

MEMBER'S REQUIREMENTS

BURIAL OR CREMATION

Burial/Cremation
(delete as applicable)

INTERMENT

Interment can be at Norwich, Caister or Colney Wood

Norwich/Caister/Colney Wood
(delete as applicable)

UNDERTAKER

Allcock Family Funeral Services in Norwich are familiar with the requirements for Jewish funerals.

Allcock Family Funeral Services tel 01603 766996/Other
(If "other" then please specify)

RESERVED PLOTS

It is possible at Norwich to purchase and thereby reserve a grave space. Have you or do you intend to purchase an adjacent plot in advance or after first death?

Yes/No/Not applicable
(delete as applicable)

Plot number, if known:

BURIAL IN-DEPTH

This is possible at Caister but not at Norwich

Yes/No/Not applicable
(delete as applicable)

RITUAL WASHING

Is ritual washing required?

Yes/No

PREFERRED OFFICIANT

Do you have a preference as to who you would like to officiate? If so indicate and include their name, if applicable

Rabbi/Student Rabbi/Lay Reader/No preference
(delete as applicable)

TRADITIONAL BLACK COFFIN

Yes/No
(delete as applicable - if "no" then please specify)

SHIVA PRAYERS

Shiva prayers are usually for one night only

Yes/No
(delete as applicable)

Any other requirements, describe below:

I confirm that the above information is a correct indication of my preferences for my own funeral arrangements. I confirm that nothing in the above constitutes a contract with the Progressive Jewish Community of East Anglia, its Council or any of its members. I recognise that none of my instructions can be regarded as binding upon the Progressive Jewish Community of East Anglia, its Council or any of its members since ultimately my next of kin is responsible for decisions regarding the arrangements for my funeral. I confirm that this document imposes no financial or other obligation whatsoever upon the Progressive Jewish Community of East Anglia, its Council or any of its members.

Signature of member:

Date signed:

Signature of witness:

Date signed:

Name of witness in BLOCK CAPITALS:

Address of witness: