



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

**Raincoast Funeral and Cremation Services Ltd.**  
116-618 East Kent Avenue South, Vancouver, BC, V5X 0B1

**Pre-arrangement Information**

Name: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Name at Birth (if different): \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ P# \_\_\_\_\_

Birthplace: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Occupation: \_\_\_\_\_ Industry: \_\_\_\_\_ Years: \_\_\_\_\_

(If retired, state last occupation and total years so engaged)

Marital Status: \_\_\_\_\_ SIN: \_\_\_\_\_ Health Card #: \_\_\_\_\_

Name of Husband or Wife (incl. Maiden name): \_\_\_\_\_

Full Name of Father: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Father's Place of Birth: \_\_\_\_\_

Full Name of Mother: Maiden: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Mother's Place of Birth: \_\_\_\_\_

Physician's Name: \_\_\_\_\_

Do you have a Pacemaker or Other Radioactive Device? Please Circle:  If Yes, where? \_\_\_\_\_

How many Death Certificates will be required for your estate? \_\_\_\_\_

**Wishes**

Cremation or Burial – *Where?*: \_\_\_\_\_ Memorial or Funeral – *Where?*: \_\_\_\_\_

Music Requests? – \_\_\_\_\_ Celebrant Requests? – \_\_\_\_\_

Additional Info: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Executor/Next-of-Kin to Proceed with Arrangements**

Name: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email (if desired)\*: \_\_\_\_\_

**Please send back the completed form to [info@raincoastfs.com](mailto:info@raincoastfs.com), by fax to 604-324-1936  
or your Raincoast Funeral and Cremation Services Representative.**

*\*We will not use your email address for any purpose other than correspondence regarding these arrangements.*

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



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### Document Checklist:

- Will (we will photocopy the page showing executorship and last page showing witness signatures)
- 2 pieces of Identification (Birth certificate, Passport, Driver's Licence, BC ID)
- SIN (Social Insurance Number)
- Care Card (sometimes listed on back of BC ID card)
- Recent photo (to help us identify and/or prepare for viewing)
- Clothing – if needed (including undergarments, socks, shoes, etc.)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

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