MASONIC LAST RITES REQUEST INFORMATION

Many times we put off the difficult decisions in our life, feeling our time has not yet come. Unfortunately this lack of action can result in leaving to others decisions we would much prefer to make ourselves. In an effort to assure your desires are known, the following form has been designed as a service to help prepare each of us for that time when we must approach that undiscovered country, that house not made with hands, eternal in the heavens. Make sure that your loved ones have a copy of the completed form so that your desires may be known.

To the members of	Lodge No	, Grand Lodge of Colorado,
members of my immediate family home.	ily, members of the clergy and th	ne proprietors of the funeral
Upon my death I would like to l	have: (Circle the appropriate bod	ly/s)
Masonic/Knights Temp	olar/Rose Croix funeral services of	conducted at the funeral home.
Masonic/Knights Temp	olar/Rose Croix funeral services of	conducted at my place of worship
Masonic/Knights Temp	olar/Rose Croix grave side service	es
No services		
I would like to have my Masoni	ic apron:	
Placed upon my person		
Draped upon my casket	or table during the services	
Buried with my remains		
Given to	after the	services
I would like my Masonic and M	fasonic related jewelry (rings/s, p	pin/s, watches, etc):
Left on my person and b	ouried with me	
Left on my person durin	g my the services	
Given to my local lodge	for future presentation to a wort	hy brother
•	ic and Masonic related mementos	s (Books, awards, etc):
Civon to		

Donated to my local	lodge		
Donate to the Grand	Lodge		
Any other instructions you w	vould like to Provid	le:	
family and loved ones at a ti	me when you will b	s intended to provide comfort and to be unable to guide them. Should yease give careful thought to your re	ou decide to
make a copy to keep with yo funeral director or Pastor. T	our personal records his form will be ke	exact give eareful thought to your research to your research to give a coppt on file at the lodge and may be a starization not required) may sign in	by to your local altered or
Signature	Date	Witness Signature	Date
		Witness Signature	Date