





# Statement of Funeral Goods and Services

**NAME OF BENEFICIARY** \_\_\_\_\_

(Beneficiary is who burial services are for – can be same as Trustor/Purchaser)

\_\_\_\_\_ I am interested in membership only. Enclosed is my completed membership registration form. I understand I will be receiving my Simple Traditions Cremation & Burial Lifetime Membership card in the mail shortly.

\_\_\_\_\_ I am interested in taking advantage of the California Master Trust Plan, along with membership in Simple Traditions Cremation & Burial. Please send me the trust documents reflecting the selections made below. I am also enclosing my completed Membership Registration form and the trust payment indicated below.

Print Name: \_\_\_\_\_ Signature \_\_\_\_\_

(Name of Trustor/Purchaser)

Direct Burial Service:

(Direct Burial with Casket Included) \$1,575.00 \_\_\_\_\_

(Direct Burial without Casket) \$875.00 \_\_\_\_\_

**ADDITIONAL SERVICES (To be added to above total)**

Chaplain Services for Memorials & Visitation \$300.00 \_\_\_\_\_

Dressing and Preparation \$150.00 \_\_\_\_\_

Pacemaker Removal \$50.00 \_\_\_\_\_

Caskets.....\$895.00-\$10'000.00

*There is no specific or any other evidence that any casket with a sealing device will preserve human remains.*

**ADDITIONAL FUNDS:**

(Price not guaranteed for items such as death certificates, caskets, merchandise, or added services)

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

**PAYMENT SELECTION:** (check all that apply)

\_\_\_\_\_ Monthly Payments    \_\_\_\_\_ Card Payment    \_\_\_\_\_ Check Payment    \_\_\_\_\_ Paid in Full

\*Pre-Arranging Direct Burial - Prices subject to change based on the cost of services at time of death.\*