





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)     \$2,345.00 \_\_\_\_\_
- (Direct Burial without Casket)     \$1,395.00 \_\_\_\_\_
- (Green Burial with Casket Included)     \$2980.00 \_\_\_\_\_

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

Pacemaker Removal     \$75.00 \_\_\_\_\_

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.\*