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***PREPARING  
FOR  
ETERNITY***

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***Christ Church of Oak Brook  
Thirty-First & York Road  
Oak Brook, IL 60523***

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## Dear Friend...

The message of Jesus Christ to you and to all who put their trust in Him is that we need not fear death. As difficult as it is to let go of this life – with all its beauty, sweetness, and relationships – Jesus has prepared a place for those who follow Him that will make us realize that life on earth had been but a shadow of what was possible. Scripture says that in that place there shall be no tears, no heartache, no worry. Instead we will know for all eternity the wonder and joy of basking in the unveiled brilliance of God's love.

That does not remove the sadness of leaving behind, for the time being, the people we love. Yet one of the most loving things we can do for them, is to give them information that will assist them in honoring our wishes once we have moved on. Amidst the understandable confusion and grief which our loved ones will feel at the time of our passing, we can bring them relief by leaving behind instructions to guide them. It is for this reason that this booklet has been prepared. Amongst other things, this booklet provides a place for you to record information about...

- ❖ Your Wishes Regarding the Prolonging of Your Life..... p.3
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If you should like the assistance of a Pastor in the completion of this booklet, don't hesitate to say so. Once you have filled out the information suggested here, you may also wish to file a copy with the church office, in the event that the original is misplaced. We would also be happy to make a copy or two for your close family members at your request.

In Christ's love,

*The Pastoral Staff  
Christ Church of Oak Brook*

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## My Wishes Regarding the Prolonging of My Life

*The issue of a terminally ill person's right to a dignified death is a significant one. The accompanying form for a "Living Will" provides a place to register thoughts regarding this subject.*

*If an individual chooses to fill out this form, it should be signed by two witnesses and a copy given to the doctor. It is wise to review and redate the Living Will periodically to demonstrate that one's intent has not changed.*

*Since this document has moral but not legal standing, it may be altered. If the wording does not in all respects conform to your intentions, then make whatever changes may be required.*

### The Living Will

If the time comes when I can no longer take part in decisions for my own future, let this statement stand as the testament of my wishes: If there is no reasonable expectation of my recovery from physical or mental disability,

I, \_\_\_\_\_

request that I be allowed to die and not be kept alive by artificial means or heroic measures. I ask that drugs be mercifully administered to me for terminal suffering.

I believe that death is as much a reality as birth, growth, maturity and old age. As a Christian I affirm life; yet I claim the promise of Christ that the same God who meets me in life will meet me in death, and beyond death. For that reason I do not endorse the hopeless and often frantic continuation of "life" beyond that point where there is no reasonable expectation of recovery.

This request is made after careful consideration. Although this document is not legally binding, I hope that you who care for me will feel a strong obligation to honor its mandate. I recognize that it places a heavy burden of responsibility upon you, and it is with the intention of sharing that responsibility and of mitigating any feelings of guilt that this statement is made.

My Signature: \_\_\_\_\_

1. Witness' Name: \_\_\_\_\_

Witness' Signature: \_\_\_\_\_

2. Witness' Name: \_\_\_\_\_

Witness' Signature: \_\_\_\_\_

Date of Signing: \_\_\_\_\_

### **The Durable Power of Attorney for Medical Care**

It is also possible for you to select someone to make health-care decisions for you should you become unable (because of coma or other mental incapacity) to make those decisions for yourself. The person that you select will have the legal power to make decisions on whether life-prolonging medical treatment will be given or withheld and can – but is not legally bound to – follow your desires or instructions for medical care as stated above or elsewhere.

The appointment of this person is carried out by completing and signing a Durable Power of Attorney for Health Care document, available through your attorney.

A Durable Power of Attorney for Health Care will be even more effective than a “Living Will” in ensuring that your wishes will be respected, since you can choose someone you trust to carry out these wishes and vest in that person the legal right to do so. Once completed, this form should be given to your doctor, attorney, and the individual specified as the decision-maker.

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## Who Should be Contacted at the Time of My Death?

This is by no means a complete list, but these are a few people who ought to be contacted at the time of my passing to help handle various administrative affairs...

### My Pastor

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

### My Employer

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

### My Attorney

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

### My Accountant

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

My Stockbroker

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Account No. \_\_\_\_\_

My Insurance Agent

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Policy Number \_\_\_\_\_

My Children's Guardian

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

My Trust Officer

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Account No. \_\_\_\_\_

My Financial Counselor

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Account No. \_\_\_\_\_

This is by no means a complete list, but these are a few people who would and could contact other family and friends at the time of my passing...

1. Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

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

2. Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

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

3. Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

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

4. Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

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

5. Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

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

## Where Are The Important Documents Located?

At the time of your death, your survivors may need access to papers and records whose whereabouts may not be immediately obvious. One of the kindest things you can do for them is to record where such materials can be found.

Please keep in mind that documents that would be difficult or impossible to replace should be stored where the danger of destruction by fire or other accidental means is minimal. A fireproof safe might be a worthwhile investment, keeping in mind that your survivors may experience some delay in gaining access to a safe deposit box. Some items on the list – your legal and living wills for example – should be kept in more than one location.

To the best of my knowledge, the following documents can be found in the places specified below...

KEY: N = No Such Doc B = Bank W = Work H = Home O = Other

<u>Document(s)</u>	<u>N</u>	<u>B</u>	<u>W</u>	<u>H</u>	<u>O</u>	<u>Details</u>
Wills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Trust agreements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Powers of Attorney	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Burial instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Cemetery deed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Safe combination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Employment benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Employment contracts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Investment portfolio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Stock plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Stock options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Stock certificates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Certificates of Deposit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Bonds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Pension records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Social Security records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Title insurance records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Life insurance records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____





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## My Wishes Regarding the Disposition of My Remains

As regards Medical Research, my preference is:

- That my body not be used for this purpose.
- That my body be sent to the following medical school or scientific center for the promotion of anatomical or scientific studies:

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*Please note: These arrangements should be made in advance with the funeral director and the school*

- That permission is hereby granted for the removal of my eyes for the use of living persons who may benefit from an eye bank program.
- That my heart, kidneys, etc., may be removed for use in transplants.

As regards Final Disposition of my remains, my wishes are...

- That my body be cremated and that my ashes be:
  - buried.
  - placed in a memorial wall.
  - scattered.
- That my body be buried.
  - with embalming.
  - without embalming.
- That my loved ones do with my body what they feel is best.

I would like my remains to be buried/placed/scattered at the following location:

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## My Wishes Regarding the Disposition of My Estate

The preparation of a Legal Will is a tremendously important form of Christian. Without such a document, the State may administer your estate without regard for the individual special needs of your loved ones, and the court can make decisions about who will be named guardian of your dependents, in ways that might not accord with your values and wishes.

When visiting a lawyer to prepare a Will it is important to provide the following information:

- ❖ a list of your spouse and all dependents
- ❖ your choice of executor for your estate
- ❖ the name of a trusted guardian for any dependent children
- ❖ information as to your assets (see section on “Location of Important Documents”)

Having been encouraged throughout our Christian lives to play a part in God’s care for his people and world, many individuals choose to continue to do so after death. It is possible to make a provision in your will that provides bequests to your church or other organizations through which God will continue to use something of your life to work for the good. Should you be interested in further information about how to make a bequest to the church, please contact one of the Pastors.

Please remember too that it is important to consult your attorney every 2 to 3 years to ensure that your Will is current, and that it reflects both changes in life’s circumstances and in estate tax laws.

- My attorney has a copy of my will.
- I have made a provision for the ongoing ministry of the Church in my will.

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## My Wishes Regarding Funeral/Memorial Services

While you may be inclined to encourage your loved ones not to make too big a deal of your passing, Funeral or Memorial services provide an immensely important time and place for loved ones...

- ❖ *To express the love they feel for you and the thanksgiving they feel to God for the gift of your life.* Your life is a unique and unrepeatable wonder. No matter how hard you may be on yourself, others will want to and need to respond in affection and gratitude for you.
- ❖ *To process some of the immense grief they will feel* at your passing. Without events like funeral/memorial services, human hearts take much longer to heal, or can get stuck in destructive grief.
- ❖ *To benefit from the support of other friends and family.* God calls us to grieve and to celebrate in community rather than in isolation. A funeral/memorial service can be a blessed connection-point out of which flows much encouragement and strength.
- ❖ *To experience the grace and Spirit of God.* Through the readings, prayers, and music, individuals can encounter the love and power of God, renewing them for the adventure of ongoing life, and teaching them all over again what life and love is about.

By expressing in advance your personal wishes for the nature and content of such services, you will greatly help your loved ones and pastor create a service that is honoring to you, enriching to those who come, and glorifying to God. Please check the appropriate statements below, fill in the necessary blanks, and feel free to alter any statements to suit your personal wishes.

As regards the viewing of the body, my preference is:

- That my body not be "viewed".
- That my body be "viewed" *only* by the immediate family.
- That the matter of "viewing" be left to the discretion of my immediate family.
- That my body should be "viewed" as follows...
  - at the church.
  - at home.
  - at the funeral home:

As regards the location of a Funeral or Memorial Service, my preference is:

That it be held in:

- the sanctuary of (name church): \_\_\_\_\_
- the Funeral Home.

That the casket/urn:

- be present. (This makes it a “*Funeral*” service.)
- not be present. (This makes it a “*Memorial*” service.)

*Please note that at a service at Christ Church of Oak Brook the casket will always be closed prior to the service.*

If the casket is present at a service in a funeral home, it is to be:

- closed prior to the service.
- open prior to the service.

As regards service attendees:

- I would like the service to be open to any who would like to come.
- I would like the service to be a small private one.

As regards Scripture passages, please be sure to include (*see Helpful Resources section for suggestions*):

- the following texts:  
\_\_\_\_\_  
\_\_\_\_\_
- whatever texts the pastor and my family feels appropriate.

As regards Music, my preference is for (*please check all that apply and see Helpful Resources section for suggestions*):

- Organ.
- Vocal (specify soloist if you wish).
- Congregational singing.
- Other.

Musical selections I wish played or sung:

\_\_\_\_\_

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As regards Clergy officiating at the service:

The minister from the Church that I prefer to officiate is:

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In addition, I would like the following clergy to be invited to assist in the service:

Name \_\_\_\_\_

Address \_\_\_\_\_

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

As regards memorial gifts, my preference is that interested individuals give  
(Please check as many as apply):

- Flowers
- No Flowers
- Gifts to the Christ Church of Oak Brook Memorial Fund
- Gifts to \_\_\_\_\_.

As regards Pallbearers, if needed, the following individuals would be my choices, if they were able to come:

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As regards Honorary Pallbearers, if needed, the following individuals would be my choices, if they were able to come:

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As regards Funeral/Memorial Expenses, I prefer that:

- my family do what they feel is best
- expenses be kept below \$\_\_\_\_\_

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## Some Helpful Resources

The Christian tradition contains a vast wealth of wonderful resources dealing with the subject of death and with the hope we have in Christ. As you think about the reality of your death, or as you plan out your funeral/memorial service, these materials may be of some encouragement or inspiration...

### Scripture Passages

Deuteronomy 33:27..... The eternal God is your dwelling place.  
Psalm 23 .....The Lord is my shepherd, I shall not want.  
Psalm 46 .....God is our refuge and strength.  
Psalm 90 ..... Lord, you have been our dwelling place for all generations.  
Psalm 121 ..... I lift up my eyes to the hills from whence comes my help.  
Ecclesiastes 3.....For everything there is a season.  
John 3:16 ..... For God so loved the world...that no one should perish.  
John 11:25-26..... I am the resurrection and the life.  
John 14 ..... Let not your hearts be troubled.  
John 14 .....In my Father's house are many mansions.  
Romans 8.....Nothing can separate us from the love of God.  
1 Corinthians 15 .....Christ died for our sins and salvation.  
1 Thessalonians 4:13-18..... Grieve, but only as those who have hope.  
Revelation 3:20 .....Behold, I stand at the door and knock.  
Revelation 7:16-17 .....On what heaven will be like.

### Hymns of Hope and Comfort

A Mighty Fortress ..... #1  
Amazing Grace..... #111  
Be Still My Soul.....  
Blessed Assurance ..... #214  
Children of the Heavenly Father ..... #30  
For All the Saints..... #170  
Good Is the Lord ..... #142  
Holy, Holy, Holy ..... #7  
How Firm a Foundation ..... #135  
How Great Thou Art..... #8  
Jesus Christ is Risen Today ..... #78  
Jesus, Lover of My Soul..... #199  
O For A Thousand Tongues to Sing..... #102



O God Our Help in Ages Past .....	#31
O Love That Wilt Not Let Me Go .....	#238
Praise to the Father .....	#15
The Lord's My Shepherd .....	#147
What a Friend We Have in Jesus.....	#250

### **Books that Deal with Death, Grief, and Hope**

#### On Helping Loved Ones Cope With Your Dying and Death...

- John Coburn, *Anne and the Sand Dobbies: A Story About Death for Children and Their Parents*.
- Colgrove, Bloomfield, and McWilliams, *How to Survive the Loss of Love*.
- C.S. Lewis, *A Grief Observed*.
- Therese S. Schoeneck, *Hope for the Bereaved* (available in the Pastoral Care Office).
- Richard Watts, *Straight Talk About Death with Young People*.
- George Westberg, *Good Grief*.

#### On Understanding Where God Is Amidst the Loss and Pain...

- Diogenes Allen, *Traces of God*.
- Douglas John Hall, *God and Human Suffering*.
- C.S. Lewis, *The Problem of Pain*.
- Gerald L. Sittser, *A Grace Disguised*.

#### On Making the Most of Life Right Now

- John Claypool, *Tracks of a Fellow Struggler*.
- Nina Herrman, *Go Out in Joy*.
- Elizabeth Kubler Ross, *On Death and Dying*.
- Henri Nouwen, *Our Greatest Gift*.
- Leo Tolstoy, *The Death of Ivan Ilyich*.

### **The Greatest Resource of All**

If you have never personally asked Jesus to forgive your sins, to wipe away your past, and to become your Lord and Savior, then why not do that now. Whatever your history, God will joyfully receive you into his grace today. All you need do is ask him in prayer. By doing so, you can have absolute assurance: that your life here will have counted for something eternally significant; that death will not have the last word about you; that you will be with Christ in heaven after you die; and that the best is yet to be. If you've

never really done so with conviction before, why not ask Jesus into your heart today. Speak to a pastor if you'd like to talk more about this.

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## My Life and Loves

*Following your death, there will be many who will wish to reflect during some special service or during private moments upon the color and character of your life. By providing the information below, you will give these loved ones a valuable resource upon which to reflect further. Feel free to add pages.*

My Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

1st Phone \_\_\_\_\_ 2nd Phone \_\_\_\_\_

Place of Birth \_\_\_\_\_ Date of Birth \_\_\_\_\_

Mother's Name \_\_\_\_\_

Father's Name \_\_\_\_\_

Hobbies/Interests I enjoy...

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

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**Additional Thoughts...**

The above represent my wishes which I would like to have carried out at the time of my death. I understand that this document is not legally binding. I also realize that circumstances may occur which make changes in my wishes desirable, and my family is authorized to act accordingly.

Other thoughts (*optional*)...

My Signature \_\_\_\_\_ Date \_\_\_\_\_

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## Who Else Is Aware of the Wishes Stated Here?

Copies of this document are filed confidentially with the following agents...

Christ Church of Oak Brook  
Pastoral Care Department  
Thirty-First & York Road  
Oak Brook, Illinois 60523  
630-654-1882 / www.cc-ob.org

The following Family Member or Friend:

Name \_\_\_\_\_

Address \_\_\_\_\_

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

My Attorney:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Funeral Director:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Other: