

MAIN CHAPEL
2624 West Grand Blvd. • Detroit, Michigan 48208
Tel: (313) 873-0771 • Fax: (313) 972-4405
Karla M. Cole, Manager



NORTHWEST CHAPEL
16100 Schaefer Hwy. • Detroit, Michigan 48235
Tel: (313) 835-3997 • Fax: (313) 835-0512
Gail A. Washington, Manager

JAMES H. COLE

HOME FOR FUNERALS, INC.
★★★★★

www.jameshcole.com

Vital Statistics Information Sheet

Full Legal Name: _____

Sex: Male Female Place of Birth: _____
City & State

Social Security Number: _____ Date of Birth: _____

Date of Passing: _____

Residence Address: _____

Marital Status: Married Widowed Divorced Never Married

If currently married list Spouse's Name (include maiden name): _____

Race: _____ Ancestry: _____

Served in the Armed Forces: Yes Branch: _____ No

Father's Full Name: _____

Mother's Full Name (including maiden name): _____

Highest Level of Education: _____

Occupation: _____ Type of Business/Industry: _____

Informant's Information

Name: _____ Relationship: _____

Phone Number(s): _____ Email: _____

Address: _____

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Understanding You and Celebrating Their Life

Please take your time; your comfort and readiness are paramount. Feel free to share as much or as little as you feel comfortable. Every detail helps us serve you better and honor their memory uniquely.

Part 1: Reflecting Your Needs

What are the most important values you want reflected in the services for your loved one?

What are the most important values you want reflected in the services for your loved one?

Dignity Tradition Personalization Other: _____

Is there anything specific you want us to know to better serve you and honor your loved one's memory?

Part 2: Celebrating Their Journey

What are three words you would use to describe their personality?

What is your most cherished memory with them?

What were their passions, hobbies, or interests?

Did they have any favorite sayings, songs, or quotes?

Is there a particular story or achievement of theirs that you would like to share?

Part 3: Your Vision for Their Legacy

How do you envision their Celebration of Life service?

Intimate Grand Traditional Other: _____

What message or feeling do you want attendees to take away from the service?
