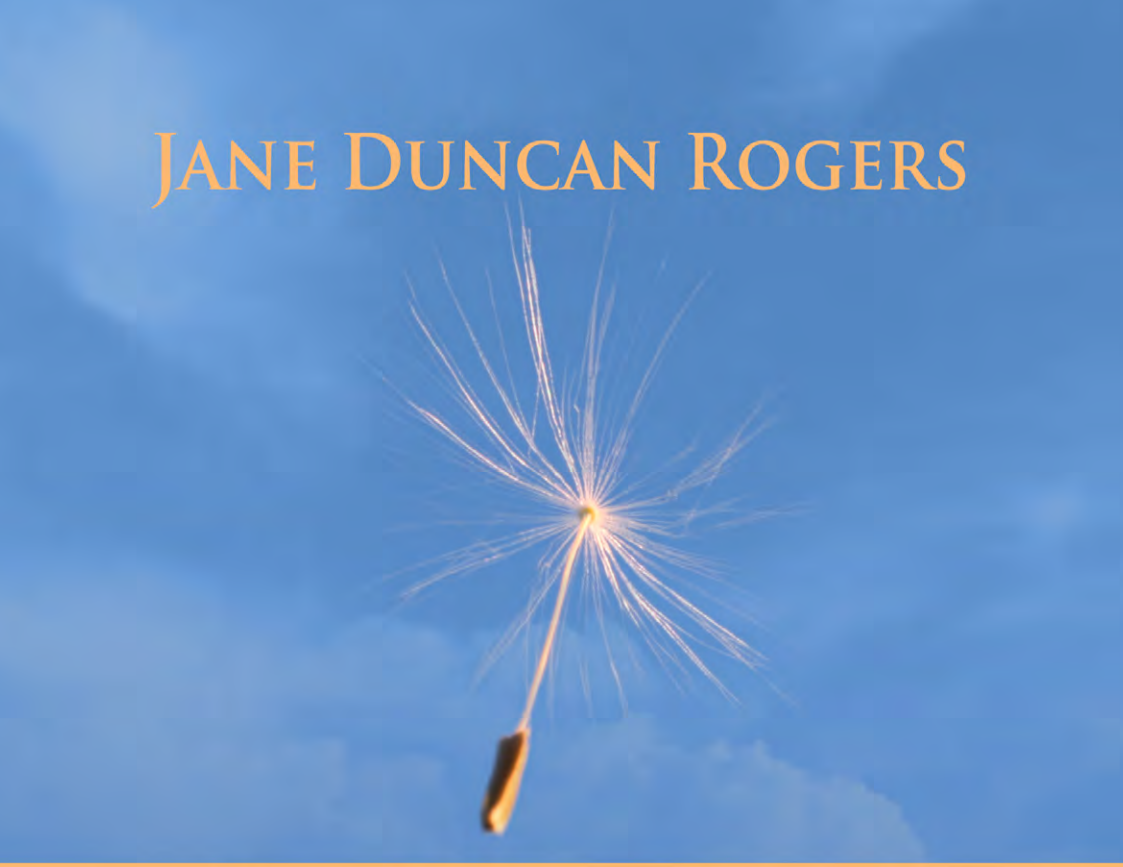
Jane Duncan Rogers



The Workbook

Before I Go

Practical Questions *to* Ask *and* Answer Before You Die

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Jane Duncan Rogers

Before I Go Solutions®
creating good end-of-life plans

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INTRODUCTION

This Workbook is an expanded version of the questions my late husband Philip and I answered before he died in 2011, and which I wrote about in my book *Gifted By Grief: A True Story of Cancer, Loss and Rebirth*.

Having been afraid of talking about the issues the questions brought up, we were surprised to discover that it felt like we were doing a project together. It brought us closer, and was in fact a very loving process. Philip had a sense of relief and peace of mind afterwards and so did I, but the real benefits for me came in a very practical way after he died.

Grief hits in many ways, but one very common one is confusion and distress as you come face to face with the death of someone you love. This is not a great place to be making decisions from – and there are very many decisions to be made even quite long after someone dies. I was lucky – I had most of the answers already; so all I had to do was look at what we had already discussed; so much easier than trying to work out on my own what was best to do. But even so, there were many things we had not taken care of, some that popped up months later that hadn't been thought about earlier.

This Workbook is the result of my research into this area. It includes all the original questions that Philip and I asked and answered, plus many more. Given that in the UK, at the time of writing, 79% of people think it's important to put their wishes about end of life down in writing, but that only 21% actually do it, this is an opportunity for you to put your money where your mouth is, so to speak. Figures in the USA are very similar.

You'll be saving your loved ones expense, anxiety, arguments, heartache and hassle, and bringing yourself relief, peace of mind, and comfort. Not to mention saving the medical profession time and money too. When it is completed, along with all the separate legal documentation, you will have a comprehensive end-of-life plan in place.

How to Complete the Workbook

When answering the questions, don't think about them as if you were going to die within a year or so, which is the usual way we ponder our own deaths. Instead ask the following:

If I had died yesterday, what would I want to be in place?

Take your time to reflect and listen to your intuition for answers, as well as your logical brain. Both are totally valid and necessary. Believe it or not, this can in fact be a process that is, in a strange sort of way, enjoyable. I know that because of what happened for us, and what the many students who have taken the Before I Go courses have said.

However, if you are challenged with it, or find yourself wanting to do it, but simply not getting around to it, or not completing it, then please reach out for support through the website, *www.beforeigosolutions.com*. There are courses, both online and offline, which you can join.

You can also receive support with a copy of my book *'Before I Go: The Essential Guide to Creating A Good End of Life Plan'* which enables you to thoroughly think through everything you need for your end of life plan with confidence, no matmatter what country you are in. This is available through various places, including all good bookshops, and Amazon.

Here's to your successfully completed Workbook and end of life plan – enjoy the process, it really is possible.

Director, *Before I Go Solutions*®

MY BEFORE I GO WORKBOOK

Name

Phone no.

Email

Maiden/previous name

Name I am known by

Date of birth *(month/day/year)*

Place of birth *(city & country)*

N.I. number *(or Social Security number)*

Next of kin *(name and contact details)*

Local area contact *(if applicable)*

Executor

Location of my will

Name of person(s) to receive this Workbook
(if different from executor)

My doctor *(name and contact details)*

Phone and / or computer main password *(or location of)*

ICE *(In Case of Emergency details)*

Last Updated

Signed

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FAMILY, FRIENDS AND PERSONAL INFORMATION

Close Family to be Notified

For when *time is of the essence*, state here the names, addresses, emails and phone numbers for your family and close friends whom you would want notified.

This might include your spouse / partner; parents; children; grandchildren; siblings; all step-parents / children / grandchildren; close friends. (If all these are in your phone then indicate this, and how they can be identified).

Name / Email / Phone

Name / Email / Phone

I think the following might benefit from professional support (grief counselling or coaching): (list names and suggested support if applicable).

Name / type of support

Carer/Caregiver Information

If you are responsible for the care of someone else who would be affected if you were not here, complete this section:

Name and contact details of person you care for

State of health

Medication details *(if any)*

Other information *(if any)*

Under-Age Children Information

Indicate here any children who are minors, the names and contact details of their guardians, and any other information that relates to them. Also see Section H.

Name / type of support

My Personal Dates/Important Personal Information

(This may be useful information for the notification of various agencies who will need to know about your death. Decide what is relevant or important to you and complete or write N/A. It is important to write 'Not Applicable' if this is the case, so the reader knows you have seen the relevant question).

Passport No.

Birth

Marriage / civil partnership dates

Divorce / separation date

Children's birthdays

Important death dates

Adoption / foster information

Name change information *(e.g. maiden name, deed poll details etc.)*

Driving licence

Safety deposit box location

Education

Special awards / recognition & date

Membership of organisations

Military service record

Other

My Living Legacy

If you have created this, indicate the location here. Otherwise use this space to indicate anything you would like your descendants or friends to know, e.g. hobbies, interests, passions, wise words, favourite recipes, favourite places to spend time, etc.

What I want you to know

Memories

Location of memory box / recording / video *(write N / A if applicable)*

Privacy

I have decided what to keep private and have dealt with this accordingly. This includes information in my journals, diaries, computers and other devices, filing cabinet, (add any other places that are relevant to your particular situation).

Yes

No

SECTION B

PRACTICAL HOUSEHOLD AND GARDEN MATTERS

Names and contact details of cleaner, caregiver, childminder, dog-sitter or any other home help.

Cleaner

Caregiver

Childminder

Dog-Sitter

Other

Equipment Operation/Location of Instructions

Complete below if it's a short answer, or write out longer instructions overleaf, and give the location of instructions.

(Put N/A if not applicable). Tick when completed.

TV

DVD

WIFI *(Including router details and location)*

Computers

Name of computers or other devices, including login procedure
(passwords are covered in a separate section)

Phones, landline and mobile including ICE details
(In Case of Emergency)

Washing Machine

Dishwasher

Mains Water Tap

Heating System

Burglar Alarm

DIY Equipment

Keys *(include garage, shed, any other types of keys)*

Padlock Combination

Briefcase Combination

Location of guarantees, instruction manuals etc.

Lawnmower

Chimney sweep

Names of relevant service engineers

List any other household or garden matters with information as appropriate

Decluttering (aka Death Cleaning)

I have sorted / decluttered / death cleaned / organized my possessions as much as I am able or want to. I have allocated particular items for specific people, see attached list or below.

I would like my remaining possessions to be dealt with as follows:

(tick as appropriate)

- ☐ As you see fit
- ☐ According to my wishes attached to this document, or as below
- ☐ By recycling as much as possible
- ☐ Other way

List any other information regarding my possessions

List any other information regarding my possessions *(cont'd)*

Vehicle(s)

Enter information, or location of information, as required. For each different vehicle, copy this page and complete, inserting extra instructions as necessary for different vehicles. (e.g. motorhome, RV, motorbike, boat, caravan, bicycles etc).

Name of vehicle & registration no.

MOT or safety inspection date & location of certificate

Tax due date & location of certificate

Insurance due date & location of certificate

Location of registration documents

Tyre pressures

Service details

Name of garage / mechanic used

When to sell and what to do

Winter preparation

Keys information *(if applicable)*

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LEGAL AND ASSOCIATED DOCUMENTATION

The information in this section is legal – everything else in this document is simply your preference. For example, no-one has a legal obligation to arrange a funeral; but a body does need to be disposed of. However, your will and your power of attorney are legally binding, and therefore must be completed and witnessed according to the relevant instructions in your country. In some countries, the Advance Directive / Decision is also legally binding; ensure what the situation is in your country and if it is legally binding, include it in this section.

What is Probate?

This is the name generally given to the process of administering someone's estate when they die. It may be called by different names in different countries, e.g. in Scotland it is known as confirmation. When someone dies owning significant assets, a formal 'grant' must be obtained from a court to enable their estate to be collected in and divided between their beneficiaries.

Where the estate is less than a certain amount of money and only includes cash funds held in deposit accounts, you would not normally need to obtain a grant in order to obtain the money. However where the estate includes certain assets – like land or shares – you will always need to obtain a grant. Probate is made much easier, quicker and less expensive when there is a will.

Last Will and Testament

A WILL is a legal declaration by which a person, (the ***testator***), names one or more people to manage his or her ***estate*** and provides for the distribution of his or her property at death.

Make sure your will is up-to-date and created under the law of the country you are living in; even a very simple one will make the life of those left behind much easier and less expensive. You can create one yourself using a template if your estate is simple; otherwise if you have complex affairs, it is best to take legal advice.

If you have children under the age of 18, you should appoint someone in your will as their guardian, should you die suddenly. If you are the caregiver for relatives, specify the same. Otherwise the courts will likely determine who will take care of your children or those you care for. This is a costly and time-consuming process – don't neglect it!

Legacies

Any details of a financial donation you may want to leave also need to be entered in your will. (Suggestions: arts organisations, local societies, your spiritual/religious organization, healthcare or medical research charities, historic building organisations, social charities, creation of scholarship funds).

If it is simply a preference that this legacy takes place, and you trust your executor or other person to act according to your instructions, then instead list here to whom you wish your donation to go (and the amount) to be donated.

I wish to donate *(amount)*

Name and contact details of person or organization
(recipient of donation)

My will was last updated on

Location of my will

Power of Attorney

A financial power of attorney is a legal document which allows a trusted person appointed by you to take control of your financial, legal and business matters should you become unable to deal with them. A health and welfare power of attorney does the same, as regards your health. Having these in place can help avoid stress, disagreements and unnecessary costs in your family. They come into place only when you are incapacitated and cannot speak or act for yourself. They end when you die, and can be revoked at any time. There is slightly different terminology for a financial power of attorney and a health or welfare power of attorney in different countries, so make sure any research you do is relevant to the country in which you live.

In many countries or states you can complete a power of attorney yourself. You can also appoint a lawyer to help you do so. Search on the internet for power of attorney (your country/state name) and follow instructions accordingly.

I have a power of attorney for finances; it's location is

I have a power of attorney for health and welfare; it's location is

I do not have a power of attorney for finances

I do not have a power of attorney for health and welfare

Advance Directive/Living Will/ Advance Healthcare Decision

An Advance Directive, Advance Decision or Living Will is a document relating to the medical treatment and/or care you wish or wish not to receive should you be seriously incapacitated at any point.

In England and Wales this is a legal document; in Scotland and Northern Ireland at the time of writing it is not legal, but if you have one it is highly likely that your doctors will follow your wishes. In the USA, it is a legal document, but it may be called slightly different names; make sure you have the relevant one for your state.

Consider whether you wish to have one, and make sure it is completed and witnessed by the appropriate person(s) according to your country's requirements.

Location of my Advance Directive

POLST

(USA only — Provider Order for Life-Sustaining Treatment)

Only in existence in some states; if you have one, enter it's location here

If you wish not to be resuscitated, you need to have a form completed by your doctor, which is different depending on where you live. Make an appointment with your doctor and state this is your wish.

I have a DNR *(do not resuscitate)* Order; it's location is

I have an ACP *(Anticipatory Care Plan)* (UK Only); it's location is

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SECTION D

FINANCIAL INFORMATION

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Document Locator and Privacy Details

Make access available of all usernames, email addresses, and passwords (if appropriate) to your executor / partner / appointed person stated at the beginning of this document.

List here your method of secure access, for instance, the location of a paper document or the use of an online password manager such as 1Password,

https://agilebits.com/onepassword
www.dashlane.com or http://keepass.info/

My "1Password" Master Password is

My "dashlane" Master Password is

My "keePass" Master Password is

My Passwords can be found in *(alternative location)*

If you don't wish to write these down, then use a code that your executor and / or family member are aware of in a separate way.

The following checklist consists of documents your family / special person / executor will need to get hold of in the eveant of a medical emergency or death. Note the location if applicable – if this is different from the details on the Financial Affairs form in this workbook, then state that.

Many people create Excel documents or other methods to record their financial details, in which case, state what you have completed and the location of these.

I have provided the following information
(write N / A if not applicable):

All bank account numbers, including savings accounts

All credit card details

Pensions and annuity documentation

Insurances of all kinds

Life policies

Tax Returns *(if applicable)*

Driving Licence information

Home mortgage accounts and deeds

Rental properties – accounts and deeds

Holiday properties – accounts and deeds

Stock and share certificates

Trust Deed information

Information regarding any business and / or partnership agreements

Energy utility companies

Mobile or cellphone companies

Landline / internet details

Other

Other

Solicitor / Lawyer

My Solicitor / Lawyer is
(name, company, address, email, phone number)

Payments, Bills

Any bills to be paid immediately after my death will be paid by
(name of your partner, accountant, lawyer, executor or other)

Cessation of Services

All cessation of necessary services, and other matters regarding my end of life affairs will be taken care of by *(name, address, email etc.)*

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Bank Accounts

All bank account numbers, including savings accounts, and joint accounts (or location of):

Name (s)

Bank / Account Number

Name (s)

Bank / Account Number

Name (s)

Bank / Account Number

Credit Cards

All credit card details (or location of):

Name (s)

Bank / Account Number

Name (s)

Bank / Account Number

Name (s)

Bank / Account Number

Pensions

Pensions and annuity documentation *(including details of company contact numbers / email)*

Tax Returns

(if applicable)

My NI or IRS number is

My Unique Tax Reference is *(found on the top of your tax return or any correspondence)*

Property

Home mortgage account and deeds or rental agreement *(or location of)*

Rental properties and agreements, or relevant mortgages and deeds, or location of *(this relates to rental properties you own and are tenanted by someone else)*

Holiday properties and agreements, or relevant mortgages and deeds *(or location of)*

Insurance

Insurances of all kinds, or location of them *(e.g. funeral, life, household, special possessions, health, or any other kind of insurance particular to your own lifestyle. List company names, numbers of policies, contact details)*

Driving licence information *(if you have a driving licence, state location)*

Certificates

Stock and share certificates *(list company and company details, or name of broker with their details)*

Trust Deeds *(state relevant information below)*

Business Dealings

Information regarding any business and / or partnership agreements
(if you have your own business, then make sure you have a full succession or business continuity plan in place. If you have much simpler arrangements with individuals, then list them here)

Household

Energy / utility companies *(gas, oil, electricity, supplier of logs or any other regular payment you have set up for your energy. List their details here)*

TV licence details *(or location of)*

Mobile phone companies *(name of company or companies, and website information or phone number)*

Landline (and internet) companies

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LAST DAY WISHES

Preferred Ideal Scenario

(NB This is not at the point of death, but in the last few days before death occurs; and it is your preferred ideal scenario. This section should be completed with reference to any Advance Directive you have made).

Location

In my last days, I would like to be *(home, hospital, hospice, relatives' home etc.)*

People Present

In my last days, I would like to have present the following *(list names and contact details. State if you would prefer to be alone)*

Names of people I definitely ***do not*** want to be present

Pets

I would like my pet(s) to be around in my last days *(name pets)*

I would like my pet(s) to be cared for by

Music

List the name of specific pieces, a general idea of the type of music, whether you wish to have live singing (name of group or Threshold Choir and contact details). Name any playlist you have already created, and it's location.

I would like the following music to be played

Atmosphere

What kind of atmosphere would you like to create? List if you want candles, dim lights, music, flowers, special bed linen, plants, ornaments, cuddly toys, precious items around you. Include any smells that you particularly like.

I would like the following atmosphere to be created if possible

Further Instructions

Any other last days wishes instructions

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SECTION F

FUNERAL ORGANISATION AND AFTER DEATH

Body Disposal

You may not mind what happens to your body, but if you make decisions about this it is much easier for your loved ones to manage. You cut down the risk of argument enormously if you have made the decision for them. Consider the following and write down what you prefer, putting 'I don't mind' or 'not applicable' if that is the case.

Religious Requirements

I am *(religious persuasion)*

I would like the following to be attended to

Body Donation for Medical Science

I would like to donate my body to *(list the organization and the contact details – this has to be organized in advance of death)*

Organ/Tissue Donation

I want to donate organs as specified on the relevant organ donor website *(state details)*

Type of Burial

I would like my body to be:

(tick as appropriate)

- Cremated
- Buried
- Direct Cremation
- Other *(give details on next page)*

Other *(list instructions here)*

If crematorium *(address, contact details)*

What I want done with my ashes *(Include location of ash scattering or internment, scattering when and by whom)*

If burial *(burial site address)*

Embalming

I would like my body to be embalmed:

(tick as appropriate)

☐ Yes, I want my body to be embalmed

☐ No, I do not want my body to be embalmed

Undertaker

☐ Yes, I want an undertaker to take care of everything

Name of preferred undertaker *(include address, contact details)*

DIY Funeral

☐ Yes, I want a DIY funeral arranged

Name and details of who will arrange this

Body Container

I would like:

(tick as appropriate)

☐	Coffin	☐	Open	☐	Closed
☐	Casket	☐	Open	☐	Closed
☐	Shroud				
☐	Urn				
☐	Other				

Describe the full details of what you want here, e.g. what type of material you wish your container to be created from, what decoration if any. Include any relevant organization or company that provides it, or the location of your container if you already have it.

Container details

Dressing of Body

Itemize favourite clothing, make up and hairstyle. Attach a photo if important.

I want my body to be dressed / made-up as follows

I want the following to be included alongside my body

Before the Burial

I want my body taken care of as follows:

(tick as appropriate)

- Kept at or brought home
- Kept in funeral home

Kept at funeral directors premises

Kept in hospital morgue

Other *(give details)*

Other

Transportation of Body

If the body needs to be transported from point of death to the funeral home or other location, how would you like this to happen?

Transport arrangements *(e.g. hearse, back of a truck, white van, horse and cart etc.)*

Pallbearers

Names & contact details of those you wish to carry the coffin / shroud and / or to lower it into the ground.

Pallbearer 1

Pallbearer 2

Pallbearer 3

Pallbearer 4

Pallbearer 5

Pallbearer 6

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Funeral and Other Services

You can have whatever you want. It is however, highly recommended that you discuss your desires with at least one other person who is in agreement with you.

(tick as appropriate)

☐ I would like a funeral service
(A service held in your memory with your body present)

☐ I would like a memorial service
(A service held in your memory with no body present)

☐ I would like an end-of-life celebration / wake / leaving party
(State whether with or without the body)

☐ I would like direct cremation
(No service of any kind)

NOTES

Informing Distant Family/Friends/Work Colleagues

I want the following people to be informed of my death. State names below or location of contacts list or address book.

This section is for more distant relatives, those whom you knew from when you were young, current friends, work colleagues and any others.

Name / Email / Phone

Name / Email / Phone

Name / Email / Phone

Name / Email / Phone

Name / Email / Phone

Name / Email / Phone

Name / Email / Phone

Clubs/Societies/Organisations

I would like the following clubs / societies / organisations to be informed of my death *(See section A)*.

Name *(include address, contact details)*

Name *(include address, contact details)*

Name *(include address, contact details)*

My Favourite Possessions

Paintings, art, clothing, sculptures, books, poetry, collections, special recipes – list anything else of value to you. Who would you like to have these or know about them?

A few of my favourite possessions

Pets

Name all your pets, their needs and habits, any medication requirements and who you wish to take care of them.

My pets *(list their special needs)*

Please take care of my pets *(list carers and which pets)*

Memorial Celebration

I would like to be remembered with a Funeral / Memorial / Celebration / Wake / Leaving Party.

I would like to be remembered with *(list type of celebration with details)*

List name and contact details of the person(s) you would like to be in charge or resonsible for this – it could be a person of faith, a celebrant, family member or friend.

Name of organizer *(include address, contact details)*

Location of celebration *(include address, contact details)*

Date and time of celebration

Dress code *(I would like people attending to wear the following)*

Presentation

I would like a video presentation to be made of my life. List anything in particular you would like to be mentioned.

Details *(state where to find information to contribute to this)*

Guests

People I'd like invited to the celebration *(list names and contact details)*

Menu Details

Menu *(list any particular wishes or exceptions)*

Music

Type of music I would like played *(list details)*

Readings

I would like the following readings *(and list who should read them)*

Any Other Details

Any other thoughts or details

Obituary

The official announcement of death, typically in a newspaper.

(tick as appropriate)

- [ ] I don't want an obituary at all
- [ ] I have written my own obituary

It's location is

- [ ] I would like someone else to write my obituary

I would like an obituary written by

Eulogy

A speech or piece of writing that is a tribute to someone who has just died. Usually written by a close friend and read at a funeral, memorial or celebration, you can also write this yourself.

(tick as appropriate)

- [ ] I don't want any eulogies
- [ ] I have written my own eulogy

It's location is

I would like someone else to write a eulogy for me

I would like a eulogy written by

Your Digital Presence

State here what (if any) preparations you have made with your different social media accounts, and/or how you wish your different online accounts to be dealt with, and by what date after your death.

Name who should take care of this. (Consider more than one person, who is comfortable in the online world). Use the checklist to indicate what you have taken care of, and the next page to itemize any details.

Social media *(give details on the next page)*

Email accounts

Email accounts

Bank accounts/financial sites

Photo sharing sites

Ebay

Amazon

Other shopping sites

Travel/frequent flier sites

Professional membership sites

Media sites *(YouTube, Netflix etc.)*

Online cloud backup systems

Health or medical accounts

Online publications

Spreadsheet files

Document files

Own website or blog

Gaming accounts

Other

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Headstone/Gravemarker

State here whether you want a headstone, gravemarker or other marker of any kind, and what you want (e.g. bench, tree, shrub, headstone, plaque, etc.) Include any wording you would like on any marker. Also state location of this marker.

Headstone or gravemarker *(give details, location)*

Charitable Offerings/Flowers

State what flowers if any you want mourners to give; (if no flowers wanted, state that); if you'd like flowers to be donated to an organisation, give details of that here.

Offerings or flowers *(give details)*

Donations/Charities

If you would rather people made financial donations, state name of charity or organisation and full details.

Charity or organizations *(give details)*

NOTES

SECTION G

WORK/BUSINESS

Are you still working? *(give name and address of employer)*

Work friends or colleagues you'd like informed of your death
(give name and contact details)

State any work information you would like kept private, and how any announcement to work colleagues should be made

Any other notes for your employer?

If Self-Employed

I am a solo professional; I would like the following clients to be notified in the event of my death.

Client *(include where to find contact details)*

Client *(include where to find contact details)*

Client *(include where to find contact details)*

Client *(include where to find contact details)*

Client *(include where to find contact details)*

Significant Associates

Name and list contact details of any other significant people associated with your self-employment (accountant, solicitor, book-keeper, significant contractors, suppliers etc.).

Associates or suppliers *(include address and contact details)*

Associates or suppliers *(include address and contact details)*

Associates or suppliers *(include address and contact details)*

Business Owners

If you have a business, state location of your Business Continuity Plan, and who will take responsibility upon your death, plus any other relevant details.

Location of Business Continuity Plan *(include contact details of those responsible for its implematation)*

NOTES

SECTION H

CARE OF CHILDREN UNDER 18

This section is to be used for children between the ages of 1-18. It is primarily aimed at supporting a co-parent in the event of your death but will also be helpful should the responsibility for your child be passed on to others.

If you have more than one child, please copy this section for each one.

When completed it will

- allow for some continuity of care in many aspects of your child's life
- allow people caring for your child to easily access key and varied information in a time of grief and change
- ensure that the details of your child and how you have parented them are not lost
- allow the person caring for your child access to some understanding of your views and voice, and where appropriate those of your child, which they may find helpful
- be a testament to the care you have for your child and those who will look after them

Remember, this is not a legally binding document - consult a lawyer if you want to make your wishes legally binding on those caring for your child.

How to use this section

For simplicity, this plan refers to a child for whom you have parental responsibility as 'your child' throughout this document and does not discriminate between child and young person.

This section sits alongside your main Workbook but can be used as a stand alone document. It outlines the major areas connected to your child and their development, and is intended to act as a signpost to where further information can be found as opposed to being fully comprehensive. If you feel you need to expand on the information provided, then please detail where this information can be found in the Notes section at the end.

Confidentiality

If you find that you don't want to record some of your answers in written form due to confidentiality, you could chose to have a conversation with a relevant other instead so that at least they are aware of your wishes. If this is the case, please make a note of who you talked to and when in the plan. Make sure it is kept up to date and relevant to your child's development. We recommend that you review it at least once a year.

Advice on simplifying the process and supporting yourself

This document spans 1-18 years of age, therefore it could be quite overwhelming. If you feel daunted by completing it, take out any sections which are irrelevant to your child's stage of development at present or ask a friend or family member to. Remember you don't have to complete it all at once.

Thinking about what will happen to those you care for in the event of your death can be a very difficult thing to do and may trigger anticipatory (or other forms of) grief. However, it can also deliver great peace of mind.

It will be made easier if you join a group of people who are also completing this task, to discuss things which arise; or do it with the person you co-parent with, or someone else you trust.

Alternatively, you could use a Before I Go End of Life Plan Facilitator who is trained in supporting you to complete your plan. See *https://beforeigosolutions.com/facilitators/*

(Co-written with Jen Storey, End of Life Plan Facilitator)

Make sure you cover the areas below that are relevant to your child, and use the Notes section below to do so.

- General Information
- Custodial / Legal arrangements Finances
- Gender and Sexuality
- Religion / Spirituality
- Relationships
- Routine and Behaviour
- Food, Diet and Exercise
- Pre Schooling / Schooling and Childcare Activities, Skills and Interests Technology
- Supporting Independence
- Legacy
- Your Death
- Further Information

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IT'S THE END

Make a date in your diary for when you will check to ensure your answers are kept up to date. Your birthday week is a good time to do this.

If you still have decisions to be made, questions to be asked and answered, or legal requirements still to be completed, then…

you can receive support to help you take the necessary actions and get this workbook and all the legal documentation completed.

Join a *Before I Go Method: End of Life Planning Made Easy* workshop or group programme.

There are a variety of online and offline programmes and workshops run regularly, in various locations, and private 1:1 support too. Check the website *www.beforeigosolutions.com* for up to date details.

It is a LOT easier doing this stuff in a group of others doing the same thing! So if you have got stuck, or haven't even got started, then visit the site and find a group near you, or sign up for the online group.

Thank you for doing this – it is a selfless act, as you won't be around to see the gratitude on your loved ones' faces when they are able to take care of the remains of your life here on earth. But I can assure you, they will be very grateful ☺

Remember:

Creating a good end of life plan is a great going away present

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Visit *www.beforeigosolutions.com* for further copies of this Workbook, and the *Before I Go Essential Guide to Creating A Good End of Life Plan*. You will also find a wealth of information about on and offline courses and trainings hosted by the Before I Go Academy.

JANE DUNCAN ROGERS
Founder, Before I Go Solutions®

Before I Go Solutions®
creating good end-of-life plans