

Membership Application
FUNERAL CONSUMERS ALLIANCE OF LOS ANGELES
P.O. BOX 122
Cressey, CA 95312
Phone: (213) 222-6440
Email: support@fcalosangeles.org

Please complete and return a form for each individual member. Type or print with a pen.

SECTION 1: MEMBERSHIP INFO

Member #1

First Name

Last Name

Address 1 (Street or P.O. Box Number)

Address 2 (If Necessary, Unit # or Apt. #, etc.)

City

State

Zip

Mobile Phone

Home Phone

Email Address (Newsletters and membership info, meetings, etc.)

Someone we can call if we can't reach you. (Provide name and number.)

PLEASE NOTIFY US IN CASE ANY OF THE ABOVE INFO CHANGES.

THANK YOU.

SECTION 2: MEMBERSHIP FEE

Membership Fee and/or Donations by check should be sent to:

FCA of Los Angeles
P.O. Box 122
Cressey, CA 95312

Membership (\$50 each)	\$ _____
Donation (optional)	\$ _____
Total	\$ _____

Be sure to make your check payable to "**FCA of CA**" for the appropriate amount. Be sure to Memo "**FCALA New Member**" on your check. Also, be sure to include your membership application, one per person.

Very Important! Memberships begin when your application and your check have been received and processed.

DISCLAIMER: By typing your name below, you are signing this application electronically. You agree that your electronic signature is the legal equivalent of your manual signature on this application. Cursive signatures may also be provided in lieu of electronic signature.

Signature of New FCALA Member or
Conservator

Date

Printed Name of New FCALA Member or
Conservator

SECTION 3: STATEMENTS OF UNDERSTANDING

1 The Lifetime Member understands that:

- the Funeral Consumers Alliance of Los Angeles (FCALA) is a 501(c)(3), non-profit, nonsectarian organization entirely operated by volunteers working to protect consumer's right to choose a meaningful, dignified, and affordable funeral
- the FCALA strongly recommends that everyone reviews the information at (www.fcalosangeles.org) or at other sites via links provided prior to making any funeral-related decisions so that you can learn about your rights as a consumer and protections available to you by the Federal Trade Commission and State of CA Consumer Affairs Department, etc.
- the FCALA strongly encourages everyone to visit all the local funeral homes in their area so they can meet the staff, see the facilities, collect written information, and review their findings in the comfort of their home where they are free from any pressure to make a purchase. (As with other consumer products and services, the least expensive product or service is not necessarily the best one for you. Nevertheless, the most expensive product or service does not guarantee the best offering either.)
- the FCALA does not endorse, steer, or encourage anyone, in any way, to seek services over any other local mortuary or funeral home
- he/she is under no obligation to use any funeral home or mortuary services
- monies sent to FCALA are non-refundable.

ACKNOWLEDGEMENT/UNDERSTANDING

I have read and acknowledge the content of this page and understand the above statements.

SECTION 4: INSTRUCTIONS FOR FINAL ARRANGEMENTS

THIS SECTION SHOULD NOT BE MAILED TO US WITH SECTIONS 1 -3.

MORTUARY OR FUNERAL HOME SELECTION:

Name of Funeral Home Mortuary you want to use.

Street Address

City State Zip Code

Phone Number

Fax Number

Email Address

PART 1: TYPE OF SERVICE

DIRECT CREMATION:

(If you chose cremation, select one of the following choices or explain below.)

Direct Cremation I will provide container, no service

Direct Cremation use the least expensive from funeral home

Other (Explain how you'd like your Direct Cremation handled.):

DIRECT/IMMEDIATE BURIAL:

My non-embalmed body to be transported in the least expensive container to the _____ cemetery.

(Cemetery plot should be arranged in advance, otherwise, embalming may be required at additional charges.) Graveside services are also available for an additional charges. There may be additional charges for service outside a specified distance from the mortuary. Be sure to find out in advance.

to become my **Secondary Designated**

Person.

SECTION 5: WHAT DO I DO NOW?

1. **ONLY SEND US PAGES 1 - 3.**
2. Give copies of Pages 4 - 7 to:
 - your Primary Designated Person,
 - your Secondary Designated Person,
 - and any family member or friend whom you want to know your final wishes.

WHAT DO I DO ONCE-A-YEAR?

- Be sure to review Pages 4 - 7 once-a-year to make sure that all your selections are current and up-to-date. Sometimes people change their mind about their final arrangements. Other times a change in a Designated Person is necessary.
- If changes need to be made, just get new copies of whichever page(s) you need from our website or contact us. Once Pages 4 - 7 have been completed, be sure to give copies of the new documents to your:
 - **Primary Designated Person,**
 - **Secondary Designated Person,**
 - any family member or friend whom you want to know your final wishes,

As always, we at the FCALA are committed to helping you, your family member(s) and friend(s) via education and encouragement to get educated, know your rights, and don't get taken advantage of. We know thinking about these things isn't a lot of fun, but just know this. By doing the "heavy lifting" now, you're saving your family member(s) and friend(s) a lot of heartache at a very sad time because you took the time to plan ahead. Strong work!

Call us at (213) 222-6440 or send us an email. We're here to help!

DECLARATION

I DECLARE THAT THE FOREGOING TO BE MY WISHES AND AFFIX MY SIGNATURE HERETO: I understand that neither the Funeral Consumers Alliance of Los Angeles (FCALA) nor its volunteers incur any obligation in regards to any of the services requested herein. Moreover, neither the FCALA nor its volunteers act as an agent for me or my designated person in execution of these instructions. Payment is due the assigned mortician at the time services are rendered.

Signature of New FCASMC Member/Conservator Date

Printed Name of New FCASMC Member/Conservator