



Shaping Your Digital Legacy

How will your family and friends and the world at large remember you once you've transitioned? With a little forethought and planning, you can help shape your digital legacy.

One way to do this is through MemoryBox. MemoryBox is the nation's premier memorialization website and app.

With a MemoryBox online memorial, you, your family and friends can post and share photos, videos, and sound files about you, as well as comments, simply, from any device, and from anywhere in the world. Plus, it serves as a place they can return to, again and again, once you've passed. With MemoryBox, a loved one is never farther away than your phone. (NOTE: Every [Cremstar](#) cremation comes with a complimentary online memorial at MemoryBox!)

According to Dr. Clay Routledge, world-renowned expert in the psychology of nostalgia, memory and death:

*"Study after study has shown that nostalgia acts as a psychological resource that helps people cope with life's stressors and uncertainties, resulting in increased positive mood, self-esteem, feelings of belongingness, and perceptions of meaning in life. If you're a family member or friend of someone who's dying, or of someone who has recently passed, MemoryBox can help you cope with your loss more effectively, delivering **real clinical benefits.**"*

If you are preparing a eulogy, an obituary, or are preparing a MemoryBox online memorial, below is a checklist of questions you should make sure to ask. Use them while interviewing a loved one (especially if they are in hospice and soon to transition), or answer the questions yourself to ensure that you're remembered accurately and with dignity.

We strongly recommend video recording the interview using a smartphone or some other digital recording device and then uploading the recording to YouTube (listed as either Public or Private). For easy access, you can then link these YouTube videos to your MemoryBox online memorial. (NOTE: You can select a URL to which you can link your Featured Image when you first set up an online memorial Memory, or do so by clicking on Edit if the Memory already exists.)

Smartphones and digital cameras are great for video interviews, and you can use video-editing software like iMovie to edit the clips later. But consider getting a tabletop tripod for the phone or camera to stabilize the recording and free you up to interact more with your subject.

When recording video interviews, park the camera on a tripod to prevent image shakes and to keep you focused on the interview. If you're serious about sound quality, an external microphone can also improve

your interview. A good small clip-on lapel (lavaliere) microphone for smartphone or camera is reasonably priced and can make your subjects more at ease than a hand-held mic shoved in their faces.

If you prefer not to load up your phone’s storage, a pocket digital voice recorder is an alternative.

Recording directly onto the laptop with an external microphone (like a podcast) is another way to capture the spoken-word history. Free software like the cross-platform Audacity or GarageBand for iOS can also be used to edit the interviews.

RECOMMENDED QUESTION SETS

Your Information (or the name of the individual whose MemoryBox Memory you’re creating, if this is not for yourself).

Subject First Name: _____
Subject Last Name: _____
Address (Street, City, State, ZIP): _____
Phone: _____
Primary Email: _____
Social Security Number: _____

If married, in a recognized Civil Union, or if you’ve given legal authority to a Designated Agent other than your traditional Next-of-Kin (NOK), please provide their information here:

First Name: _____
Last Name: _____
Address (Street, City, State, ZIP): _____
Phone: _____
Primary Email: _____

The name and address of the person you wish to designate as the Memory’s Successor, taking over as MC should you no longer be able to do so for whatever reason, if different from the individual named immediately above as spouse, partner, or legal designee.

Successor First Name: _____
Successor Last Name: _____
Address (Street, City, State, ZIP): _____
Phone: _____
Email: _____

DOB (Mo/Day/Yr)

Where were you born? (City/State/Country)

Your Mother's Legal Name

First Name: _____

Middle Name: _____

Last Name: _____

Your Father's Legal Name

First Name: _____

Middle Name: _____

Last Name: _____

What were your parents' professions/jobs?

Mother (include approximate years)

Father

_____	_____
_____	_____
_____	_____ (Over)_____

How many siblings do you have, and what are their names, genders, and ages (today)?

Name	Age (approximate)	Gender
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Where did you live while growing up?

City/Country	Address	Dates
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

What is your earliest memory?

_____ (Over)_____

Where did you go to school?

Name	Address	Grades/Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(Over)_____

Highest Level of Education?

- Grade school
- Some High School
- High School Graduate
- Some College
- College Graduate (Degree & Date of Graduation)
- Some Graduate School
- Advanced Degree (Advanced Degree & Date of Graduation)

Did you have any pets growing up? If so, what kind, and what were their names?

Name	Species/Breed	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Tell us a story about an animal (pet) that's really influenced your life.

(Over)_____

Say something about your first love or major crush.

(Over)_____

Say something about your first car or motorcycle.

(Over)

What cars/motorcycles have you owned/leased throughout your life?

Car Make	Description and/or Name	Date of ownership
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<hr/>	<hr/>	<hr/>
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(Over)

Describe your worst driving accident and/or major moving violation?

(Over)

Career

Job Title	Name & Type of Business	Dates
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<hr/>	<hr/>	<hr/>
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(Over)

Were you ever in the military?

Branch	Rank & Duty	Dates
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<hr/>	<hr/>	<hr/>
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(Over)

If you were in the military, tell us something about your experience.

(Over)___

Have you ever been arrested or spent time incarcerated? If so, and you feel like sharing, cite the reason(s) and describe your experience(s).

(Over)___

Who was your "best" friend?

In grade school: _____

What is your most vivid memory of this friend?

(Over)___

In high school: _____

What is your most vivid memory of this friend?

(Over)___

In college/grad school: _____

What is your most vivid memory of this friend?

(Over)___

Tell us a few stories about your closest friends. Where did you first meet them? What are they like? How have they influenced your life? How would you like to be remembered by them?

(Over)

Name your significant others, your spouse(s) or partner(s).

Name	Email/Address (if available)	When were you together?
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
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<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

(Over)

How did you first meet your spouse, partner, or most significant other?

(Over)

Do you have any children?

Name	Email/Address (if available)	DOB/DOD
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

(Over)

If you close your eyes and think about your children (if applicable), what is the first memory that pops into mind for each one?

(Over)

If you close your eyes and think about your partner (spouse, significant other), what pops into your mind?

(Over)

If you feel like sharing, please say something about your sexuality. Where do you fit on the spectrum? When did you lose your virginity and how? Was your first big love your first sexual encounter? Have you had many partners? Do any particular moments stand out in your memory?

(Over)

Describe the major ailments, injuries, and diseases/conditions you've suffered throughout your life.

(Over)

Have you ever had a recurring dream or nightmare? If so, describe it here.

(Over)

What's your greatest achievement?

(Over)

What's your greatest failure or regret(s), if any?

(Over)

How would you describe your politics? If your political affiliation or leaning has changed over your lifetime, when did it happen, and how?

(Over)

List the causes you've supported and why.

(Over)_____

How would you characterize your religious or spiritual beliefs? Do you practice a specific faith? What is it, and is it the same faith in which you were raised as a youngster? Have you ever had what you would call a religious experience and, if so, please describe it?

(Over)_____

If you were a car, what make and model would you be?

If you were a color, what would it be?

If you were a texture, how would you feel to the touch?

If you were a taste, what would it be?

If you had a superpower, what would it be?

List ten (10) words or less to define your...

- Mind

- Body

- Heart

- Spirit

What do you most want to be remembered for?

(Over)___

If you could do one thing over again in your life, what would it be?

(Over)___

If you could speak at your own Ultimate Party or Life Celebration event, what would you say about yourself ... and about those in attendance?

(Over)

Finally, please enter the names and email addresses of particular individuals to whom you'd like to leave a **Final Word** – everything you wanted to tell them when you were alive but never did, good or bad.

Final Word Recipient #1 First Name: _____
 Final Word Recipient #1 Last Name: _____
 Phone: _____
 Email: _____

Final Word Recipient #2 First Name: _____
 Final Word Recipient #2 Last Name: _____
 Phone: _____
 Email: _____

Final Word Recipient #3 First Name: _____
 Final Word Recipient #3 Last Name: _____
 Phone: _____
 Email: _____

Final Word Recipient #4 First Name: _____
 Final Word Recipient #4 Last Name: _____
 Phone: _____
 Email: _____

Final Word Recipient #5 First Name: _____
 Final Word Recipient #5 Last Name: _____
 Phone: _____
 Email: _____

Please send your Final Word documents to your Next-of-Kin or Designated Agent.

If you have any questions, please contact us at info@cremstar.com, or by calling us 24/7 at (888) 802-0999.+

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