

Living Will Declaration

To my family and all those concerned with my care:

I, _____, of _____ being of sound mind, make this statement as a directive to be followed if for any reason I become unable to participate in decisions regarding my medical care.

Upon my death and transition into the next life, I do not wish to be reborn as a ghost path or an animal. I do not wish to suffer. Instead, I wish to follow Amitabha Buddha and to arrive at his Western Pure Land of Ultimate Bliss. To all my family and friends, I wish to ask for your assistance so that I may not suffer, but instead remain calm and peaceful to prepare for my arrival to the Western Pure Land.

In the event that I should suffer from a terminal illness to the extent that doctors foresee no possible recovery, I ask that no medical treatment be undertaken. Should I already be in the hospital at this point, I wish to be checked out and brought back home. Please notify my assigned family member or friend _____ at telephone number(s) _____ and _____

Once home, please position me in the most comfortable and natural position in which I may rest. The assigned family member or friend will lead others in chanting "Amitufo." Should I decline to the point where I lose consciousness and I am no longer aware of my surroundings, the assigned family member or friend shall have full authority in making any decisions regarding my well-being. If this person cannot be contacted, please find a Buddhist master or Buddhist believer to aid in the chanting of "Amitufo" until the assigned person can be reached. Within twenty-four hours prior to and after my death, I would like to ask my friends and family to comply with the following:

1. Do not touch or move my body or even my bed.
2. Do not change my clothing.
3. Do not place dry ice or other substances on my body. Sandalwood incense may be burned if there is any odor.
4. Do not let a breeze blow directly onto my body.
5. Do not allow the scent of alcohol, onions, scallions, garlic, or chives to enter the room.
6. Do not smoke, cry, or talk in the room.

My purpose for asking this is to create an atmosphere in which I may remain calm and at

peace. The only sound I wish to hear is “Amitufo,” so that he may escort me to the Pure Land.

If I am at home upon my death, my family should take turns chanting "Amitufo" for eight to twenty-four hours. At this point, I am ready to be moved, washed and dressed. This period of chanting is the best time to assist me to be calm and peaceful. All funeral arrangements can be set up afterwards. If I should pass away in the hospital, please follow hospital policy and chant as much as is allowed.

During my terminal illness and within forty-nine days after my death, all family members should adopt a vegetarian diet. I do not wish for any killing to be associated with my death. All funeral offerings must be vegetarian. The use of alcohol is strictly prohibited. Funeral arrangements should be kept simple, and proper Buddhist etiquette should be followed. I do not wish for any unnecessary excess.

Within forty-nine days following my death, I sincerely ask my family members and friends to seek my rebirth into the Pure Land, and to perform good deeds such as giving offerings to the Three Jewels of the Buddha, Dharma, and Sangha, printing sutras, helping the needy, and so on. These good deeds will help me to attain additional good karma, and further assist me in arriving at the Pure Land. Most important is for my family to sincerely chant “Amitufo.”

In order for me to benefit the most and to peacefully arrive at the Pure Land, the above points must be followed. This will not only benefit me but all those involved as well. In this manner, I wish for everyone to learn and to believe in Buddhism. Thus, everyone can arrive at the Pure Land, as well.

Amitufo to all!

These directions express my legal right to request or refuse treatment. Therefore, I expect my family, doctor, and all those concerned with my care to regard themselves as legally and morally bound to act in accord with my wishes.

Signed _____ **Date** _____

Witness: I declare that the person who signed this document, or asked another to sign this document on his or her behalf, did so in my presence and that he or she appears to be of sound mind and free of duress or undue influence.

Witness _____ **Date** _____

Witness _____ **Date** _____