

FUNERAL/MEMORIAL INFORMATION

Full name: _____
Birth Date: _____ Death Date: _____
Birth Place: _____ Place of Death: _____
Cause of Death: _____
Age of Death: _____

Visitation: _____ Hours: _____
Place of Visitation: _____
Place of Service: _____
Place of Interment: _____

Service and Service Participants:

Presiding Minister: _____ Preachers: _____
Organist(s): _____ Soloists: _____
Ushers: _____

Lector: _____ Acolyte: _____
Pallbearers: _____

Honorary Pallbearers: _____

Communion: _____ Communion Assistant: _____
Hymns: _____

Special Music: _____

Lessons: _____

Psalm: _____ Obituary: _____

Other Readings/Family Remembrances: _____

of Reserved Pews: _____ # of Bulletins to Print: _____

Memorial Gifts Designation: _____

Flowers: _____

Meal/Food Arrangements: _____

Food Preferences: _____

of People Expected to Attend Meal: _____