

FUNERAL PLANNING WORKSHEET

1. NAME _____
Last First Middle

2. Date of Birth _____
Month / Day/ Year

3. Name of Spouse _____ (If
the spouse is not the principal contact for coordinating the service, please list the name of the
alternate contact)

Alternate contact: _____
Name

Phone number-Home Cell:

4. Name(s) of Children _____

5. ARRANGEMENTS HAVE BEEN MADE WITH THIS FUNERAL HOME:

Name _____

Address _____

Telephone _____ Contact Person: _____

6. I HAVE CHOSEN THE FOLLOWING FUNERAL ARRANGEMENTS:

(check all that apply):

A. _____ At our Parish:

_____ Vigil Service*

_____ Funeral Mass

_____ Burial of the Dead

* Location of Vigil Service (if at a different location):

Name of Parish

B. _____ At a different Parish

C. _____ Memorial Mass at Saint Mark/Lawrence at a later date.

7. Office of the Dead:

_____ At the Vigil

_____ Before Funeral Mass

8. Musical Requests:

There are two places in the Mass for a hymn or solo; at the Offertory and at Communion. If you have a question about the nature of a musical selection, please consult the clergy prior to making any arrangements.

Selection 1: _____

Selection 2: _____

9. Eulogies: *There are no eulogies given at the funeral. Such may be offered at the visitation, or at the Meal of Hospitality/Mercy Meal gathering after the service.*

10: Will you host a hospitality gathering for all to attend? _____ Yes _____ No

If yes, do you wish us to include the information in the funeral bulletin? _____

Details of hospitality gathering (location, time, etc.):

11. Donations/Memorials:

12. Additional information:
