

Funeral Planning Information for the Pastor

Name: _____ Date: _____

I have made Pre-arrangements. I have not made Pre-arrangements

Check one

THE FOLLOWING ARE MY PREFERENCES:	
Funeral Home	
Person in Charge	
Disposition of remains (burial, entombment ,	
If cremation: inurnment, burial or scattering	
Cemetery Information if needed.	

Funeral/Memorial Service	
Place of Service	
Three (3) Hymn Selections	1.
2.	3.
Readings, Scripture, Poetry, other (Attached copies as needed) Psalm 23 included unless otherwise indicated.	
Musical Selections/Vocalists	
Special people to participate in service?	
Anyone who should not be asked?	
Additional requests? Explain on back.	