

FUNERAL INFORMATION

Date _____ Member _____

Name

FIRST MIDDLE (MAIDEN) LAST

Birth

DATE PLACE

Death

DATE PLACE

Visitation

DATE TIME PLACE

Funeral

DATE TIME PLACE CD OR DVD

Burial

DATE TIME CEMETERY

Reception

HOW MANY BEFORE OR AFTER WHAT SERVED

Children/
Parents/
Other Family

NAME RELATION NAME RELATION

NAME RELATION NAME RELATION

NAME RELATION NAME RELATION

Contact(s)

NAME CELL EMAIL

NAME CELL EMAIL

Funeral Home

NAME CELL EMAIL

SERVICE PLANNING:

Readings

PASSAGE	WHO READS	PASSAGE	WHO READS
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PASSAGE	WHO READS	PASSAGE	WHO READS
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Songs

#	TITLE
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#	TITLE
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#	TITLE
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#	TITLE
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Solo

TITLE	WHO	EMAIL	CELL
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TITLE	WHO	EMAIL	CELL
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Organist

NAME	EMAIL	CELL
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Pastor

NAME	EMAIL	CELL
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Additional Requests
