

FUNERAL PLAN

Full Name: _____

Date of Birth: _____

Date Form Completed: _____

I prefer to be _____ buried in a coffin or _____ cremated.

Arrangements for my burial/cremation _____ have or _____ have not been made.

Name of Funeral Home or Funeral company _____

Circumstances permitting, I wish for my burial service to take place at:

Name of Church: _____

Or

Address: _____

Celebrant or Officiant desired: _____

The Burial of the Dead from the Book of Common Prayer _____ Rite 1 or _____ Rite 2

_____ With Eucharist or _____ No Eucharist

Suggested Participants (Readers, Chalice Bearers, Pall Bearers):

Preferred Readings and Psalms (See BCP pg. 494 ff):

Preferred Hymns and other music:

Flower preferences (for the altar at the church):

Memorials in lieu of flowers to be given to: