



Funeral Planning Form

Full Name of Deceased: _____ Age: _____

Church Location: St. Ferdinand ____ St. Gregory ____ Holy Redeemer ____

Day, Date, Time of Funeral: _____

Funeral Home/Location: _____

Mass or Blessing Service: _____

Casket/Urn/Cremation Before/After: _____

Cemetery/Burial: _____ Family Going to Cemetery? _____

Next of Kin/Relationship: _____ Address: _____ Telephone: _____

Name/Contact for Planning: _____ Telephone: _____

Liturgy Planning

Old Testament #: _____ Reader: _____ Music: 1.) Gathering _____

New Testament #: _____ Reader: _____ 2.) Psalm _____

Does the Parish Need to Provide the Reader? 3.) Offertory _____

Priest Chooses Gospel 4.) Communion _____

5.) Meditation _____

6.) Closing _____

Bread/Wine Presented: Yes/No 2 People: _____, _____

Eulogy after Communion: Yes/No (*must be no longer than 3 minutes*) By Whom: _____

OFFICE USE ONLY

Family ID Number: _____ Active or Former Member of the Parish? _____

Address of Deceased: _____

Celebrant/Presider: _____

Organist: _____ Cantor: _____

Sacristans Notified: _____

Date of Birth: _____ Date of Death: _____

Sacrament of Anointing Administered? _____

Date of Form Distribution: _____

Update Electronic Sign – 'Rest in Peace'

Please Email Form to parishoffice@divinegracephgh.org