

ARRANGEMENTS FOR FUNERAL

FULL NAME OF DECEASED: _____

NAME OF FUNERAL HOME: _____

PLACE OF BURIAL: _____

NAME OF PRIEST/DEACON: _____

* FAMILY CONTACT PERSON: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

**FOOD – IF THE DECEASED WAS A PARISHIONER OF HOLY FAMILY, THE BEREAVEMENT
MINISTRY WILL CHECK WITH * FAMILY CONTACT PERSON.**

FUNERAL MASS: DATE: _____ TIME: _____

FUNERAL MASS LITURGY:

NAMES OF THOSE WHO WILL PLACE PALL ON CASKET _____

NAME OF READER

READING NO.

* You can have only one reading and a gospel reading if you so choose.

READING ONE (Old Testament): _____

RESPONSORIAL PSALM: _____ (SUNG BY CANTOR)

READING TWO (New Testament): _____

GOSPEL - FATHER _____

PRAYERS OF THE FAITHFUL WILL ALWAYS BE RECITED BY THE PRIEST.

NAMES OF THOSE PARTICIPATING IN OFFERTORY PROCESSION:

_____ NO. OF PEOPLE _____

MUSIC _____

- IF ANY EULOGIES ARE TO TAKE PLACE, THEY MUST BE DONE DURING THE TIME OF THE WAKE AND NOT DURING THE MASS.

FUNERAL INFORMATION SHEET

DATE OF DEATH: _____ AGE: _____

NAME: _____
(NICKNAME OR WHAT MOST PEOPLE CALLED HIM/HER)

BORN: WHERE: _____

 WHEN: _____

 WHERE AMONG THE SIBLINGS: _____

 NAME(S) OF SIBLING(S) STILL LIVING: _____

ANYTHING ABOUT THE PARENTS OF THE DECEASED THAT NEEDS TO BE SAID, FOR EXAMPLE, THE KIND OF LIFE LIVED AND THE ENVIRONMENT IN WHICH THE DECEASED GREW UP IN. **WHAT WAS THE MAIDEN NAME OF THE MOTHER:**

EARLY LIFE: (IN FAMILY, SCHOOLING, ETC.)

EDUCATION: _____

WORK HISTORY: _____

MARRIAGE: (WHOM) _____ (YEARS) _____

WHERE DID THEY FIRST LIVE: _____

CHILDREN:

_____	_____
_____	_____
_____	_____

ORGANIZATIONS: (CIVIC) _____

CHURCH AFILIATION: (HOW ACTIVE) _____

WHAT MASS DID HE/SHE ATTEND: _____

WHAT FAITH WAS PARTRAYED IN THE HOME: _____

NAME OF THE CHURCH ORGANIZATIONS THAT HE/SHE BELONGED TO:

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WHAT WILL YOU /FAMILY REMEMBER MOST ABOUT HIM/HER?

WHAT WILL YOU /FAMILY MISS THE MOST?
