

Date: _____

FUNERAL INFORMATION

Deceased: _____ DOB: _____ DOD: _____

Deceased Address: _____

Family contact: _____ Phone: _____

Mortuary: _____

Funeral Director: _____ Phone: _____

Rosary/Vigil Service: _____ Date: _____ Time: _____

Cemetery: _____

FUNERAL/MEMORIAL MASS

Celebrant: _____ Date: _____ Time: _____

Organist: _____ Cantor: _____

Altar Servers Request: YES _____ NO _____

First Reading: _____ Read by: _____

Responsorial Psalm: _____ Read/Sung by: _____

Second Reading: _____ Read by: _____

Gospel: _____

Prayers of the Faithful/Read by: _____

Offertory gift-bearers: _____

Eulogy/Said by: _____

Note: _____

