

**CHRIST EPISCOPAL CHURCH
FUNERAL PLANS (pre-planning)**

Date _____

Full Name _____ Date of Birth _____ (Gender) M ___ F ___

Address _____

City, State, Zip _____ Telephone _____

Funeral Home Preference: _____

Service Location: Church ___ Chapel ___ Cremation ___ Casket ___

Cemetery _____ Memorial Garden _____

Rite I Traditional Service ___ Rite II Contemporary Service ___ Holy Eucharist: Yes No

Clergy Preference: _____

Organ Prelude/Postlude/Music Preferences: _____

Scripture Preferences: *(Any scripture is permissible; for suggested passages, see suggested scripture document.)*

Select 1-3 passages of scripture.

A Psalm selection is optional.

A reading from the gospel (Matthew, Mark, Luke, John) is required only if the service includes eucharist.

1. _____

2. _____

3. _____

Congregational Hymns Preferences: *(see suggested hymns document)* _____

Musical Requests (instrumental, solos): _____

Interment: Yes No Garden _____ Cemetery _____ Private _____

Before service _____ After service _____

Other Wishes: _____

Visitation: At funeral home _____ Immediately following service _____ Other _____

Reception: Yes No at church _____ at home _____

Names of Readers or additional speakers at service: _____

Memorial Gifts to: _____

Address _____

City, State _____ Zip _____

Send acknowledgments to:

Name _____

Address _____

City, State _____ Zip _____