



Information about the person whose funeral is being planned

Name: _____

Also known as (nickname): _____ Maiden name: _____

Address (number/street/apt): _____

City/State/Zip: _____

Date of birth (month, day, year): _____

Place of birth (city/state/country): _____

Marital status: Single Married Widowed Divorced

Catholic? Yes No

Spouse's name: _____

Children: _____

Next of kin (living), if different from the spouse already named: _____

Information about those who will plan the funeral

Main contact name: _____ Phone: _____

Email: _____ Relationship: _____

Additional contact name: _____ Phone: _____

Email: _____ Relationship: _____

Funeral home: _____

Music:

Entrance: _____

Communion: _____

Psalm: _____

Song of farewell: _____

Gospel acclamation: _____

Recessional: _____

Name/phone of person we should contact with music questions: _____

Eucharistic ministers should come from the

Family

Parish ministers

Miscellaneous:

Incense: Yes No

Military honors: Yes No

Knights of Columbus honors: Yes No

Graveside service: Yes No Location: _____

Additional notes

Taken by: _____ | Date: _____