

## A FUNERAL PLAN

When a loved one dies it is often a very difficult time to be making decisions about funeral arrangements. It is when grief is almost overwhelming that the family must make many important decisions and often they wish that they knew the desires of the one who died. This is an opportunity for you to think about your funeral plans. You may use this as a guide for your thinking or you may want to use it to make your personal desires known to the pastor of First Lutheran Church. **YOU ARE NOT REQUIRED TO FILL OUT THIS PLANNING SHEET, it is offered only as a guide.**

There may be a desire for completing this together with your husband or wife or a relative or friend. For those who are willing to take time to fill out this sheet, you can be assured that it may make it easier for your family at the time of your death. (Additional copies are available at the church office.) If you have any questions or want to discuss any of these matters with the pastor, give us a call.

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

### FUNERAL PLAN

Do you want visitation at the mortuary the night before the funeral? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you want: \_\_\_\_\_ Funeral with the casket present \_\_\_\_\_ Memorial services without casket present

Do you want the funeral service to be conducted at:

\_\_\_\_\_ First Lutheran Church

\_\_\_\_\_ Graveside only

\_\_\_\_\_ Funeral Home

\_\_\_\_\_ Church in another location \_\_\_\_\_

\_\_\_\_\_ Do you want to have a pall? \_\_\_\_\_

I would like the \_\_\_\_\_ mortuary to make arrangements for the funeral.

I prefer these songs from the Hymnal \_\_\_\_\_

Scripture passages I want read **in addition to the 23<sup>rd</sup> Psalm:**

\_\_\_\_\_

Do you want communion at the funeral? Yes \_\_\_\_\_ No \_\_\_\_\_

May we send email/facebook notifications of funeral arrangements? Yes \_\_\_\_\_ No \_\_\_\_\_

### Burial arrangements

\_\_\_\_\_ Traditional burial at \_\_\_\_\_ Cemetery

\_\_\_\_\_ Cremation

\_\_\_\_\_ (If you wish body or organ donation to a medical school or hospital, it requires proper legal documents signed by you)

Memorials: Do you wish memorials indicated for First Lutheran Church? Yes \_\_\_\_\_ No \_\_\_\_\_

Will you make advance arrangements with a mortician? \_\_\_\_\_

Persons to be notified upon your death \_\_\_\_\_

If you have a will and want a record of its location, please record such location \_\_\_\_\_

If you have an attorney and desire that name on record, please indicate \_\_\_\_\_

Do you have any other information or requests? \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_