

SACRED HEART CHURCH
2889 Lincoln Ave.
Altadena, CA 91001

FUNERAL ARRANGEMENTS

Today's Date: _____ Preferred language for the Service: _____

Deceased: _____ Cause of Death: _____

Address: _____

Date of Birth: _____ Date of Death: _____ Age: _____

Contact Person: _____ Relationship: _____

Address: _____ Phone #: _____

Did the deceased receive the Anointing of the Sick before he/she died? Yes () No ()

Mortuary: _____ Contact Person: _____

Address: _____ Phone #: _____

Please check one from the following: Cremains: _____ Casket: _____

VIGIL (*If there's any*)

Date: _____ Place: _____

Time: _____ Presider: _____

MASS

Date: _____ Place: _____

Time: _____ Presider: _____

INTERMENT / GRAVESIDE

Cemetery: _____

Interment immediately after the service: Yes () No () Is the Priest needed: Yes () No ()

Should the interment be done at a later time: Date: _____ Time: _____

**DURING THE FUNERAL MASS,
YOU MAY ASSIGN PERSONS TO THE FOLLOWING:**

Pall bearers (with casket):

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Lectors for Liturgy of the Word:

1st Reading _____

Responsorial Psalm _____

2nd Reading _____

Presentation of the Gifts (*Optional*)

1. _____

2. _____

Word of Thanks after Communion: _____

DONATIONS:

Mass of Christian Burial (including Vigil Service): \$300.00

Memorial Mass: \$300.00

Vigil: \$150.00

Graveside: \$100.00

Music: \$200.00