

**St. Paul Parish
Funeral Planning Sheet**

Funeral Date: _____ **Time:** _____ **Type:** _____
Deceased Name: _____ **Common Name:** _____
Date of Birth: _____ **Date of Death:** _____

Contact: _____ **Relationship:** _____
Address: _____

Street

City, State, Zip

Home Phone: _____ **Cell/Day Phone:** _____ **Email:** _____

Family Registered at St. Paul Parish? **Yes** **No** **Please See Notes**

Immediate Family Members:
Name: _____ **Relationship:** _____

Funeral Home: _____
Address: _____

Street

City, State, Zip

Telephone Number: _____ **Email:** _____
Wake Date: _____ **Wake Time:** _____
Wake Officiant: _____ **Burial Officiant:** _____
Burial Date/Time: _____ **Burial Place:** _____

Live Stream: **Yes** **No** **Start:** _____ **End:** _____

Picture: **Yes** **No** **Size:** _____

Special Notes:

Funeral Date: _____ Deceased Name: _____	Time: _____ Type: _____ Common Name: _____
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Funeral Liturgy:

Celebrant: _____

Acolyte: _____

Readings:

First Reading: _____

Read By: _____

Psalm: _____

Read By/Sung: _____

Second Reading: _____

Read By: _____

Gospel: _____

Prayer of the Faithful: _____

Read By: _____

Presentation of the Gifts: Yes No

Presenters: _____

Name: _____

Relationship: _____

Remembrance: Yes No

Given By: _____

Remembrance Book:

Signed By: _____

Music:

Cantor: _____

Used For: _____

Song of Farewell _____

Planning Coordinator: _____

Card Sent: