

Funeral Planning Form

Wake/Memorial Service

Date ____ / ____ / ____

Name of Funeral Home: _____

Address: _____

Minister(s) Speaking at Wake/Memorial Service: _____

Additional Readers/Speakers: _____

Open Casket

Closed Casket

Urn

Special Musical Requests: _____

Hours of Visitation: _____ Requested Time for the Sermon/Prayer: _____

Full Sermon (20 minutes) Short Sermon (5-10 minutes) Prayer & Scripture Only

At the sermon's conclusion please include a prayer for people to repeat to accept Jesus as their Savior.

Special Requests: _____

Burial

Date ____ / ____ / ____

Cemetery: _____

Address: _____

Brief Graveside Prayer: _____

Special Requests: _____

*“May the grace of the Lord Jesus Christ, and the love of God,
and the fellowship of the Holy Spirit be with you all.”*

- 2 Corinthians 13:1