

IMMACULATE HEART OF MARY Funeral/Memorial Service Prep Sheet

I.

Name of Deceased: _____ Age: _____ Date of Birth: _____

Address: _____

Date of Death: _____ Date of Funeral/Memorial Service: _____ Time: _____

At IHM: Yes _____ No _____ If Not Where? _____

Celebrant: _____ Con-Celebrant: _____

II.

Next of Kin: _____ Relationship to Deceased: _____

Address _____ Phone _____

III.

Family Contact for Arrangements: and Cards _____ Phone _____

IV.

Funeral Home: _____ Phone _____

Funeral Home Contact _____ Cremation: Yes _____ No _____

Visitation Hours: _____ Funeral Home: _____ Church: _____ Before Mass: _____

Date of Rosary/Vigil: _____ Time: _____ Conducting Rosary/Vigil: _____

V.

Place of Burial: _____ Graveside Service: No _____ Yes _____ Time _____

VI.

Organist: _____ Cantor: _____ Sacristan: _____

Altar Servers:

1. _____ 2. _____ 3. _____

VII.

Funeral Buffet Notified: Yes _____ No _____ Number of People: _____ Time: _____

School Lunch Notified: Yes _____ No _____ Plant Manager Notified: Yes _____ No _____

VIII.

Volume: _____ Page Number: _____ Entry Number: _____ Computer: _____ Book: _____

Liturgy Preparation

Funeral in the presence of: _____ the body or cremated remains _____

Mass: _____ or Memorial Service: _____

Introductory Rites

Placing of the pall by family ____ Yes ____ No

Entrance Song: _____ # _____

Liturgy of the Word:

Reference

Reader

Old Testament Reading: _____

Responsorial Psalm: _____

New Testament Reading: _____

Alleluia Verse:

Gospel: _____

Intercessions:

Liturgy of the Eucharist:

Presentation of Gifts By: _____

Song: _____ # _____

Holy, Holy
Eucharistic Acclamation
Amen
Our Father
Lamb of God

Communion Song: _____ # _____

Meditation Song: _____ # _____

Final Commendation

Song of Farewell: _____

Recessional Song: _____ # _____

