

Funeral Worship Planning Worksheet

Please print full name (given at Baptism and including married name)

In the Funeral Service of Resurrection the church proclaims its glorious hope in the resurrection of the dead through our Lord Jesus Christ. The church gathers to mourn, to be comforted and to thank God for our loved one as we entrust this companion of ours into the hands of God. Trusting in God's promise in baptism that we are claimed by Christ forever, we rest in the sure hope of the resurrection. When the church gathers to mark the end of life, Christ crucified and risen is the witness of worship, the strength of mutual consolation, and the hope of healing.

The service for practicing Christians is normally held in the church, but special circumstances or your wishes may indicate the desirability of another location such as home, graveside, or funeral home.

The purpose of this form is to help you inform your family and congregation of your wishes (if any) for the worship service. Completing this form is an act of faith because we trust that although we are mortal, because of Christ, "this mortal body will put on immortality." (1 Corinthians 15:54)

PRE-ARRANGEMENTS

- I have pre-arrangements with _____ Funeral Home.
- I have a will.

LOCATION of service

- I prefer the service be held at Reformation Lutheran Church
- I prefer the service be held at a Funeral Home
- I prefer the service be held at another location (specify): _____
- I have no preference regarding the location of the service.

HOLY COMMUNION

- I prefer that Holy Communion be celebrated at the service.
- I prefer that Holy Communion **not** be celebrated at the service.
- I have no preference regarding the celebration of Holy Communion.

SCRIPTURE

- My favorite biblical image(s) or theme(s) are: _____
(leave blank if you have no favorites)
- My favorite or preferred Bible reading(s) for the service are: _____
(leave blank if you have no preference)

MUSIC

I would like the service to include the following hymn(s): _____

I have no preference regarding hymns sung at the service.

LUNCHEON

I would like my family and friends to have a luncheon following the service, if possible at
(specify.): _____

I have no preferences regarding a luncheon.

ADDITIONAL REQUESTS AND PREFERENCES:

DISCLAIMER

I understand that the information and instructions provided here are for the guidance of my church, my family, and my friends in making arrangements necessary at the time of my death. Although this information is being left for safekeeping, it is not legally binding or enforceable. I understand that this worksheet does not make the church obligated or responsible for the execution of these instructions.

Signature

Date

Print name: _____

Make copies of this document, keep one with your important papers, and give copies to:

- the church
- the Funeral Director (if you have selected one)
- your spouse
- your children
- your caregiver or companion

Funeral Planning Worksheet For Those Who Have Not Made Pre-arrangements with a Funeral Home

Please print full name (given at Baptism and including married name)

Pre-planning your funeral with a Funeral Director lets you make your wishes known so your loved ones don't have to guess or worry if they made the right choices. If you don't pre-plan your funeral, your family will be faced with difficult decisions. Pre-planning is one of the most wonderful gifts you can give your family.

The Funeral Director will discuss the following and other issues with you. If you have not yet met with a Funeral Director for pre-planning, you may wish to complete this form and give copies to your loved ones.

FUNERAL HOME

I prefer my family use the following Funeral Home/Director: _____

I have no preference as to which Funeral Home/Director is used.

PLACE AND MANNER OF BURIAL

I own a grave on _____ Cemetery

I do not own a grave; I prefer _____ Cemetery

I have no preference about the place of burial

I prefer that my body be buried in the ground

I prefer that my body be entombed in a mausoleum

I prefer that my body be cremated and that the remains be disposed of in the following manner and place: _____

I have no preference about burial or cremation.

MEMORIAL GIFTS

- I prefer that any memorial gifts be given to: _____
- I have no preferences about the designation of memorial gifts

PARTICIPATING ORGANIZATIONS

- I prefer that, if possible, the following military, fraternal, or service organization provide their customary services at the time of my funeral: _____
- I prefer that there be no services by any military, fraternal, or service organization.
- I have no preference regarding services by military, fraternal, or service organization.

ADDITIONAL INSTRUCTIONS FOR MY FUNERAL ARRANGEMENTS:

DISCLAIMER

I understand that the information and instructions provided here are for the guidance of my family in making arrangements necessary at the time of my death. Although this information is being left for safekeeping, it is not legally binding or enforceable. I understand that this worksheet does not make any person or organization obligated or responsible for the execution of these instructions.

_____ *Signature* _____ *Date*

Print name: _____

- Make copies of this document, keep one with your important papers, and give copies to:
- the church
 - the Funeral Director (if you have selected one)
 - your spouse
 - your children
 - your caregiver or companion