

Checklist for Funeral Preparations

Name of Deceased _____ M/F ____ Age ____

Parishioner? ____ If not, what church belong to? _____

Family Appointment (Date and Time): _____

Funeral Folder Received

Place of Wake _____ Time _____

Date of Funeral: _____

Time: _____

“Are you interested in having a luncheon at our parish after the burial?” If not, then where? _____

Will there be any visiting priests? _____

“Please read the Guidelines for Funeral Policy in your folder.”

****Notes: _____

