



# Christ Church Charlotte

CHRIST EPISCOPAL CHURCH

## FUNERAL PLANS (pre-planning)

Date \_\_\_\_\_

Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ (Gender) M \_\_\_ F \_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Telephone \_\_\_\_\_

Funeral Home Preference: \_\_\_\_\_

Service Location: Church \_\_\_ Chapel \_\_\_ Cremation \_\_\_ Casket \_\_\_

Cemetery \_\_\_\_\_ Memorial Garden \_\_\_\_\_

Rite I Traditional Service \_\_\_ Rite II Contemporary Service \_\_\_ Holy Eucharist: Yes No

Clergy Preference: \_\_\_\_\_

Organ Prelude/Postlude/Music Preferences: \_\_\_\_\_

Scripture Preferences: *(Any scripture is permissible; for suggested passages, see suggested scripture document.)*

Select 1-3 passages of scripture.

A Psalm selection is optional.

A reading from the gospel (Matthew, Mark, Luke, John) is required only if the service includes eucharist.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Congregational Hymns Preferences: *(see suggested hymns document)* \_\_\_\_\_

Musical Requests (instrumental, solos): \_\_\_\_\_

Interment: Yes No Garden \_\_\_\_\_ Cemetery \_\_\_\_\_ Private \_\_\_\_\_

Before service \_\_\_\_\_ After service \_\_\_\_\_

Other Wishes: \_\_\_\_\_

Visitation: At funeral home \_\_\_\_\_ Immediately following service \_\_\_\_\_ Other \_\_\_\_\_

Reception: Yes No at church \_\_\_\_\_ at home \_\_\_\_\_

Names of Readers or additional speakers at service: \_\_\_\_\_

Memorial Gifts to: \_\_\_\_\_

Address \_\_\_\_\_

City, State \_\_\_\_\_ Zip \_\_\_\_\_

Send acknowledgments to:

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State \_\_\_\_\_ Zip \_\_\_\_\_