

FUNERAL AND BURIAL INSTRUCTIONS

BUCK MOUNTAIN EPISCOPAL CHURCH

DATE _____

FULL NAME: _____
(Please print)

TELEPHONE: _____

EMAIL: _____

The person ultimately responsible for making plans for my funeral and burial is:
(Please include name, address, telephone number and relationship)

I own a cemetery plot at _____

Or will likely be buried at _____

I wish to be cremated and my ashes to be placed as follows: _____

The funeral director likely to be responsible for me is:

I have already made arrangements with the funeral home, as follows:

I desire the following type of service:

- Funeral (remains present)
- Memorial Service (remains not present)
- Church Service with burial or disposition of ashes immediately following
- Holy Eucharist
- Church Service with burial or disposition of ashes at a later date
- The entire service at the gravesite
- Other:

If it is possible, I would like the following individuals to serve at my service:

Lector(s)/Lay Reader(s): _____

Lay Eucharistic Minister: _____

Ushers: _____

Acolyte: _____

Special Musicians: _____

Pallbearers (please list at least 8 persons):

Others:

Please see The Book of Common Prayer of the Episcopal Church, pp. 469-507.

I would like my funeral service to include the following hymns and/or other special music:

I prefer the following Lessons and, if appropriate, Gospel Readings:

Old Testament: _____

Psalm(s): _____

New Testament: _____

Gospel: _____

In lieu of flowers, I would be grateful if my family would consider memorial gifts in my name to:

On my casket, please use:

The Church's pall (ceremonial cloth cover)

The American flag (customarily reserved for military personnel)

I am to be an organ or anatomical gift donor, the particulars of which are known to, or recorded at: _____

Special requests to my church and clergy person:

Signed: _____

Date: _____