



Funeral / Celebration of Life Worksheet

Name of person filling out form:

Relationship to deceased:

INFORMATION OF LOVED ONE

Full name of loved one:

Age:

Date & Place of birth:

Date & Place of death:

Cause of death:

Pastor's name:

Church:

Name of Spouse:

Date & years married:

Previous spouse's name (if applicable):

Previous spouse's name (if applicable):

Children / Spouse (if applicable)

Name

Name

Name

Name

Name

Name

Name

Grandchildren

Name & Age

Name & Age

Name & Age

Name & Age

Name & Age

Name & Age

Name & Age

Siblings

Name & Age

Name & Age

Name & Age

Name & Age

INFORMATION ABOUT THE SERVICE

Location:

Requested Date:

Requested Time:

Name of Funeral Home

Key Contact Name:

Phone Number:

Funeral or Celebration of Life?

If casket: Open or closed?

If applicable: Grave site location:

Time:

Processional to grave site?

Name of minister conducting service?

Contact Information

Additional people assisting with service?

Name

Contact Information

Involvement

Name

Contact Information

Involvement

Name

Contact Information

Involvement

There is no standard memorial format.
Please advise if there are desired
components of the service you'd like to see
about including.

Will there be a video/slide show?

Will there be special music? Do you need
have the music?

Any areas we missed?

Memorial cause that friends might be encouraged to give to?

Name of organization & ways to give:

ADDITIONAL INFORMATION ON LOVED ONE

Spiritual preferences & history

Favorite hymn or song

Favorite Bible verse

Favorite bible story

Date of salvation

Date of baptism

Hobbies & Interests

Life at a Glance

Most people's lives can be broken down into chapters, separated by career, or places of residences, years. See below for questions to help in reference.

What would their chapters look like?

Dates	Brief Description of Life Phase

Education

Name of Institution & Date Attended	
Name of Institution & Date Attended	
Name of Institution & Date Attended	

Occupation(s)

Title, Company, Dates	
Title, Company, Dates	
Title, Company, Dates	

Military Service

Branch, Location & Dates	
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Community Service

Organization & Dates	
Organization & Dates	
Organization & Dates	

Church involvement/service

Church, Description & Dates	
Church, Description & Dates	
Church, Description & Dates	

LEGACY QUESTIONS FOR FAMILY

Ask a few different family members this question, and record their answers.

If you had to describe your loved one with only three words, what three words would you choose & why?

Chosen by: (Name & Relationship)

1st Word & Why?

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2nd Word & Why?

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3rd Word & Why?

--

Chosen by: (Name & Relationship)

1st Word & Why?

--	--

2nd Word & Why?

--

3rd Word & Why?

--

Chosen by: (Name & Relationship)

1st Word & Why?

--	--

2nd Word & Why?

--

3rd Word & Why?

--

Chosen by: (Name & Relationship)

1st Word & Why?

--	--

2nd Word & Why?

--

3rd Word & Why?

--

Chosen by: (Name & Relationship)

1st Word & Why?

--	--

2nd Word & Why?

--

3rd Word & Why?

--

Chosen by: (Name & Relationship)

1st Word & Why?

--	--

2nd Word & Why?

--

3rd Word & Why?

--

Chosen by: (Name & Relationship)

1st Word & Why?

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2nd Word & Why?

--

3rd Word & Why?

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Once you have filled this worksheet out, please email it back to our Coordinator at funeral@highpointchurch.us