

# GUIDE FOR THE CHRISTIAN CELEBRATION OF LIFE

Full legal name \_\_\_\_\_

Person(s) who will make final arrangements \_\_\_\_\_

- **In the event of death, the church and pastor should be contacted before making decisions.**
- This worksheet may be filed with the church where it will be kept in a confidential file.
- You may wish to copy this form and share it with family members and/or a trusted friend.
- Please share as much information as you care to, and know that you may alter it at any time.

## SERVICE TYPE AND LOCATION

- |   |   |
|---|---|
| <input type="checkbox"/> Funeral at Redeemer Lutheran Church              | <input type="checkbox"/> Holy Communion |
| <input type="checkbox"/> Memorial service at Redeemer Lutheran Church     | <input type="checkbox"/> Holy Communion |
| <input type="checkbox"/> Funeral Home Listed below                        |   |
| <input type="checkbox"/> Cemetery Chapel                                  |   |
| <input type="checkbox"/> Graveside only                                   |   |
| Remains Present: <input type="checkbox"/> Yes <input type="checkbox"/> No |   |

Flowers (Preferences) \_\_\_\_\_

## PREFERRED FUNERAL HOME, MORTUARY, OR CERMATORY

Name & Location \_\_\_\_\_

- Prearrangements have been made  Prearrangements have not been made

### Visitation Location

- Redeemer Lutheran Church  
 Funeral Home Listed Above  
 Residence – Address \_\_\_\_\_  
 Other – Name and location: \_\_\_\_\_  
\_\_\_\_\_

### Visitation Time

- Day or evening before funeral  
 Day of funeral  
 No visitation

## PREFERRED CEMETARY

Name & Location \_\_\_\_\_

- Prearrangements have been made  Prearrangements have not been made

Military honors at graveside?  Yes (Arrangements to be made with pastor)  No

Pallbearers – Active/Honorary:

_____	_____
_____	_____
_____	_____

# FUNERAL OR MEMORIAL SERVICE PREFERENCES

## Scripture Readings (More than one option may be listed)

Old Testament \_\_\_\_\_

Psalm \_\_\_\_\_

New Testament \_\_\_\_\_

Gospel \_\_\_\_\_

Other readings \_\_\_\_\_

## Music

Hymns to be sung, or played by organist

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Anthems or other special music, if possible (and with approval of pastor)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Music NOT to be used

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Participants for reading, communion assistance, eulogies

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## **HOSPITALITY**

Would you be interested in having refreshments or a light meal served?  Yes  No

## **MEMORIALS**

Redeemer Lutheran Church  Memorial Fund  General Fund  Special \_\_\_\_\_

Other (Name and location): \_\_\_\_\_

\_\_\_\_\_

**BIOGRAPHICAL INFORMATION FOR SERVICE BULLETIN or OBITUARY**

(May continue on back of this form)

Birth Date \_\_\_\_\_ Location \_\_\_\_\_

Baptism Date \_\_\_\_\_ Location \_\_\_\_\_

Confirmation Date \_\_\_\_\_ Location \_\_\_\_\_

Marriage Date \_\_\_\_\_ Location \_\_\_\_\_

Other information – indicate if persons listed are deceased:

Parents \_\_\_\_\_

Spouse \_\_\_\_\_

Children \_\_\_\_\_

\_\_\_\_\_

Brothers \_\_\_\_\_

\_\_\_\_\_

Sisters \_\_\_\_\_

\_\_\_\_\_

Education \_\_\_\_\_

\_\_\_\_\_

Employment \_\_\_\_\_

\_\_\_\_\_

Military Service \_\_\_\_\_

\_\_\_\_\_

Church Activities \_\_\_\_\_

\_\_\_\_\_

Charitable or civic service \_\_\_\_\_

\_\_\_\_\_

Memberships \_\_\_\_\_

\_\_\_\_\_

Special Interests \_\_\_\_\_

\_\_\_\_\_

**NOTE:** For further planning, forms for Living Will, Durable Power of Attorney for Healthcare, Designated Funeral Agent, and Do Not Resuscitate Order are available on the Franklin County Probate Court website, [www.franklincountyohio.gov](http://www.franklincountyohio.gov). On the agency list, choose Probate Court then click on “Advanced Directives” from the options.