

Funeral/Memorial Planning Sheet

Second Presbyterian Church

4501 Westminster Place ♦ St. Louis, MO 63108 ♦ (314) 367-0366

www.secondchurch.net

Funeral/Memorial Plans of:

Address:

Phone:

Email:

Service Details

Clergy Preference: (1) _____ (2) _____

Funeral Director Preference:

Service to be held at: Church _____

Funeral Home _____

I prefer: Interment _____ Entombment _____ Cremation _____

Medical Science (preference of school, etc.) _____

I prefer Internment, Entombment or

Cremation to occur: before the service _____ after the service _____

My choice of Cemetery: _____

Lot is owned in the name of:

Section _____ Lot _____ Block _____

Location of Deed: _____

Scripture Suggestion: _____

(All music is subject to the approval of the Pastoral Musician)

Music Suggestions: _____

Memorials Request: _____

Flowers: _____

Reception Following Service: Yes ____ No ____

Have you included the church in your will? Yes ____ No ____

Do you desire to have information about including the church in your will? Yes ____ No ____

Vital Statistics and Historical Record

Name _____

Birth date _____ Age _____ Birthplace _____

In city since _____

Occupation
(or retired from) _____

Employed by _____

Community
Involvements _____

