

## INFORMATION SHEET FOR MEMORIAL SERVICE OF

\_\_\_\_\_

Date of Birth \_\_\_\_\_ Date of Death \_\_\_\_\_

Home Phone of Immediate Family \_\_\_\_\_

Survived by

\_\_\_\_\_  
\_\_\_\_\_

Name of Mother \_\_\_\_\_ Name of Father \_\_\_\_\_

Name of Brothers

\_\_\_\_\_  
\_\_\_\_\_

Name of Sisters \_\_\_\_\_

Others \_\_\_\_\_

\_\_\_\_\_

Place of Service

\_\_\_\_\_

Funeral Home

\_\_\_\_\_

Place of Interment

\_\_\_\_\_

Date of Service \_\_\_\_\_ Minister \_\_\_\_\_

Special Music \_\_\_\_\_ Selections \_\_\_\_\_

Call to Worship \_\_\_\_\_ Congregational Hymn \_\_\_\_\_

Hymns \_\_\_\_\_

Organist \_\_\_\_\_ Pianist \_\_\_\_\_

Scripture \_\_\_\_\_ Obituary \_\_\_\_\_

Funeral Dinner # \_\_\_\_\_ Dinner Time \_\_\_\_\_

Sound Tech \_\_\_\_\_ Flowers \_\_\_\_\_

Family History (mother, father, origin, church background, etc.)

Childhood Memories (wherever you grew up)

Education

Life's profession (where, how long)

Ministry Involvement

Blended Family Information

How you met each other

Marriage/Anniversary Date

Conversion Experience

Additional Notes: