

MEOTA PARISH

PRIDDIS MILLARVILLE TURNER VALLEY

Funeral Information Form

Name of the Deceased: Surname _____

Given Names _____

Maiden Name (if applicable) _____

Address of last residence _____

Date of birth _____ Place of birth _____

Date of death _____ Place of death _____

Religious affiliation _____ Baptized: Yes / No (please circle)

Married / Widowed / Divorced at time of death (please circle one)

Name of surviving spouse (if applicable)

Names of surviving children (if applicable)

Primary Contact: Name _____ Phone _____ Email _____

Proposed date and time of funeral

Proposed place of funeral

Name of Funeral Home

Type of service (please circle all that apply) :

Book of Common Prayer (Traditional) / Book of Alternative Services (Contemporary)

Casket / Cremation Urn

Burial / Interment of Ashes

Casket open / closed at service (if applicable)

Cemetery: _____

Scriptures

Music

Eulogy (if applicable)

Notes/special requests
