

First Presbyterian Church
3202 North Hills Road, Murrysville, Pennsylvania 15668

Funeral Preference Form

Full Name: _____

Next of Kin: (Name & Address) _____

Telephone Number: () _____

Designation for memorials (church, charities, etc.) _____

Funeral Home Desired _____

Telephone Number () _____ Burial _____ Cremation _____

Cemetery: _____

Place of Service: Church _____ Funeral Home _____ Graveside _____

Type of Service: Service with Casket _____ Memorial Service _____

(A Memorial Service is usually held in the Sanctuary following the burial or cremation)

Do you want a visitation/viewing at the Funeral Home? Yes ___ No ___

Please list any scripture readings you would like read in the service: _____

Please list any hymns sung or special music you would like used in the service: _____

Would you like any other readings used in the service? (If you could attach a copy of the reading, it would be appreciated) _____

Do you want any special services conducted? (e.g. military, etc.): _____

INFORMATION TO ASSIST YOUR FAMILY:

Do you have a will? Yes ___ No ___ Do you have a living will? Yes ___ No ___

Does someone know where your will/living will is kept? Yes ___ No ___ If yes, who? _____

Have you made a list of your bank accounts, securities, etc.?

Does your next of kin know where to find this information?

You may keep this information in a place where your next of kin can easily locate it or you may send it to First Presbyterian Church where it will be kept in a confidential file. If sent to the church, please address it to the church and mark it CONFIDENTIAL.

Date: _____

Signed : _____