

FUNERAL ARRANGEMENTS

St. John's Lutheran Church

Name _____

Funeral Date _____ Time _____

Burial Site _____ Visitation _____

Organist _____

Soloist _____

Special Music _____

Hymns _____

Scripture Texts _____

Holy Communion YES NO

Family Tribute YES NO Who? _____

Lunch at the Church YES NO Anticipated Size of Group: _____

Baptismal Date _____ Place _____

Confirmation Date _____ Place _____

Church Membership _____

Activity Within the Church _____
