

Funeral Pre-Planning Worksheet

Presbyterian Church of Lawrenceville

For many people, it is a comfort to know that the details of a funeral or memorial service have been prepared in advance. Still others prefer to have the pastor and loved ones plan the service at the time of death. This worksheet gives you the opportunity to make your preferences known now regarding your service. If you would prefer to leave any of these decisions to the pastor or your next of kin, simply leave the options blank. Also there is an option to communicate bequests to the church, and memorial gift designations. This information will remain confidential and on file in the church office until the time of death, and you may update it at any time.

Full Name: _____ Date of Birth: _____

Name(s) of next of kin and/or those making funeral arrangements upon your death:

1) _____ Relationship: _____

Telephone: _____ Email: _____

2) _____ Relationship: _____

Telephone: _____ Email: _____

Spouse _____ Years married _____

Children (name and contact information)

Names of Grandchildren _____

Great-grandchildren _____

Brothers and Sisters (name and contact information)

Activities in the community (job, church, volunteer service, etc.)

Hobbies and/or Interests

Some thoughts I think would be important to express in my funeral sermon or some words of comfort and consolation I would like to say to those who mourn my death:

Service location:

___ the Presbyterian Church of Lawrenceville

___ the funeral home

___ other location

Usually there are 2-3 Scripture passages read from the Old Testament followed by 2-3 from the New Testament. These reflect not only the faith of the church, but also the personality and favorite passages of the deceased. I would like the following Scripture readings from the Old and New Testaments: (See Last Acts of Love for suggestions)

I would like the following hymns/songs: (See Last Acts of Love for suggestions)

I would like the following people to be involved in the worship as readers, soloists, etc.

Other preferences for the service:

Funeral Home & Visitation

Name of funeral home: _____

Location: _____ Phone: _____

Have you done any pre-planning with the funeral home? Yes / No

Visitation location (Check one): ☐ At funeral home ☐ At the church

Time of visitation (Check one): immediately prior to the service ☐ after ☐

Interment (Check one): ☐ in the earth ☐ mausoleum

Name of Cemetery: _____ Location: _____

If interment will be in the ground, have you secured a cemetery plot? Yes / No

If cremation, how are ashes to be kept/disposed? _____

Will your body be donated for medical research? Yes/No

Donation to a medical school requires proper legal documentation. Which institution will be the recipient? _____

What are your wishes regarding organ donation?

Memorial Gifts

___ I have shared with my next of kin where financial gifts in my memory should be directed.

Recipients include:

___ Presbyterian Church of Lawrenceville

Other: _____

Other: _____

Planned Giving (Optional Section)

___ I/We have included Presbyterian Church of Lawrenceville in my/our will.

___ I/We have planned another type of deferred gift.

(Please list: Life Insurance, Gift-Annuity, Charitable Trust, etc.):

Please share any additional details or requests:

Name of person preparing this form (print): _____

Signature: _____ Date: _____

Do you desire a visit with a pastor to discuss these plans? Yes / No

**Please return to: Presbyterian Church of Lawrenceville,
2688 Main St., Lawrenceville, NJ 08648**