***WHEN THIS FORM IS COMPLETED GIVE IT TO THE CHURCH SECRETARY TO FILE***

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_**

***Person to contact upon my death:***

***1. Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***2. Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**WAKE LITURGY**

**I wish to have a Wake service? Yes\_\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_\_**

 **If yes,**

1. **I wish to have my Wake service in the Church \_\_\_\_\_\_\_\_\_\_\_**

 **in the Funeral Home\_\_\_\_\_\_\_\_\_\_**

1. **I wish to have the rosary said as part of the Wake service?**

 **Yes \_\_\_\_\_\_\_\_\_\_**

 **No\_\_\_\_\_\_\_\_\_\_\_**

1. **Additional requests for the Wake Service…**

**Readings, music, etc.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**FUNERAL MASS LITURGY**

**I wish to have a funeral Mass? Yes \_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_**

**If yes:**

1. **If possible I would like to have \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of priest ) preside at my funeral Mass.**
2. **Readings:**

 **Old Testament:**

 **New Testament**

 **Let the priest choose**

**3. Music:**

 **Entrance Hymn**

 **Offertory Hymn**

 **Communion Hymn**

 **Let the Music director choose \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Additional requests: *(May attach additional pages if needed)***

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I have selected a funeral home? Yes\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_**

 **If yes: Name of funeral home\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I wish to be cremated? Yes\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_**

**I wish to be buried at**

**(name of cemetery)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Witness\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**