



St. Clement's Episcopal Church
Open Minds+Loving Hearts+Giving Hands

Burial Wishes

Name: _____

Name of Spouse: _____

Date of Birth: _____

Place of Birth: _____

Parents: _____

Children: _____

Funeral Home/Cremation Services: _____

Location of the service: _____

Type of service: Rite One or Rite Two? _____

Eucharist or no Eucharist? _____

Favorite readings/psalms ? _____

(over)

Favorite Hymns: _____

Location of the committal: _____

Type of reception desired: _____

Other information you would like for the priest of St. Clement's to know:

Other questions for your consideration:

Do you have a living will, health care power of attorney, and other important documents up to date and in the proper hands?

Is your will up to date and safely stored?

Does your will represent your final wishes for charitable giving?