

Funeral/Memorial Service Preferences (continued):

Other preferences:

◆ Pallbearers: _____

◆ Clothing/Jewelry/Etc. _____

◆ Viewing of body at visitation and/or before service:

Whatever the family decides

I wish for my body to be viewed

I would rather **not** have my body viewed

In lieu of flowers, I would like donations made to:

Other important documents/information can be found:

Copies of this form have been given to:

Ancient City Baptist Church

Others: _____

Additional notes: _____



Ancient City
BAPTIST CHURCH

At the Time of My Death...

Information and Wishes

Name _____

Address _____

City _____ State _____ Zip _____

Phone Numbers _____

Signature _____

Date Prepared _____

At the Time of My Death...
Information and Wishes

Name _____

Next of kin/contact information: _____

Funeral Arrangement Preferences:

(Please remember that your family will likely make the final decisions about your arrangements. Please discuss with them your wishes after you complete this folder.)

I would like to use the following funeral home/location:

Arrangements and/or contacts I have already made:

I prefer for my body to be:

Buried: (*where*) _____

Cremated: _____

Donated: _____

Funeral/Memorial Service Preferences

I would like for my service to be held at:

Church Building: _____

Funeral Home: _____

After the service, committal at graveside for all

After the service, committal at graveside for family only

Graveside ***only*** (no service at church/funeral home)

If available, I would like my service to be conducted by:

Current pastor of my church, whoever that is at the time

Specific minister(s): _____

If the above person(s) are unavailable, alternate preferences:

Favorite Scriptures to be included in service:

Music preferences: *I would like to have:*

Congregational hymns: _____

Solo/Small group (preferred singer(s) and songs):
