



**SAINT PAUL
THE APOSTLE**
CATHOLIC CHURCH
SENECA, SOUTH CAROLINA

170 Bountyland Road
Seneca, South Carolina 29672
864.882.8551
www.saintpaulseneca.org

FUNERAL PRE-PLANNING WORKSHEET

FULL LEGAL NAME _____ **Date of Birth** _____

Primary Address: _____

Phone _____ **Email** _____

Name of Spouse _____ **Living** **Deceased**

Name of Primary Family Contact _____ **Phone** _____

Email _____

Name(s) of Children

ARRANGEMENTS HAVE BEEN MADE WITH

Name of Funeral Home / Crematorium _____

Contact Person at Funeral Home / Crematorium _____

FUNERAL ARRANGEMENTS REQUESTED (check all that apply)

Funeral Mass **Memorial Mass (no body or cremains present)**

Graveside Service **Interment of Cremains**

ARE YOU REQUESTING CREMATION? Yes _____ No _____ If Yes, _____ *before* or _____ *after* the Funeral?

BURIAL

Name of Cemetery/Columbarium _____

City & State _____

FUNERAL MASS

PLEASE WRITE SCRIPTURES & SONG TITLES IN THE APPROPRIATE SPACES.

If unsure or no preference, you may leave the space(s) blank.

Name as you wish it to appear on the worship aid: _____

PREFERRED SCRIPTURES

1st Reading (Old Testament) _____

2nd Reading (New Testament) _____

Gospel _____

PREFERRED MUSIC

Processional Hymn _____

Responsorial Psalm (sung by cantor) _____

Offertory/Preparation of the Gifts Hymn _____

Communion Hymn _____

Communion Meditation Hymn _____

Recessional Hymn _____

Will family or friends be hosting a reception for guests following services? Yes No

If yes, would you like us to include the information on the worship aid? Yes No

If yes, where will the reception take place?

ADDITIONAL NOTES:

