

St. Francis St. Francis of Assisi Catholic Church Chapewine Planning Sheet for Funeral with Mass

Name of Deceased:			Birth Date:
Registered Member of St. Francis _	Yes No	If no, where registered? _	
Baptized Adult Non-baptized Adul	lt Baptized Child	d Non-baptized Child_	Death Date:
Family Member/Contact:	st	Last	Relationship:
Family Member/Contact Registered	Member of St. Fra	ancisYes No	
Address:			Email:
Phone:	Language for	Funeral: English Sp	panish
Funeral Home/Crematory:	Contact & Phone:		
For funeral, please choose one:	Casket	No Body Present	Cremation Urn
Please provide obituary, or if not pu	blished, the deceas	ed's place of birth, names	of surviving family, and any pertinent
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information about the deceased that	would be neipiul ii	i preparing a nominy. Em	ian to overa@siatx.org.
	Cho	oices for Liturgy	
		overs for Evillagy	
Funeral readings and suggested mu	ısic can be found on	the website. If neither the d	leceased nor family are registered members of St.
Francis, readings and m	ısic will be chosen b	y the Liturgy Director. Ho	wever, please provide readers' names.
First Reading:		Reader:	
Second Reading:		Reader:	
Gathering Song:			
Recessional Song:			
Permission to Post Funeral Informa	tion on the St. Frai	ncis Website	
			signature
Please Discuss the l	Following at	your Appointmen	t with Funeral Coordinator
Visitation: Yes No Ti	me & Place:		
Rosary: YesNoTi	me & Place:		
Funeral Day/Date/Time:		Presider:	# Guests:
Burial Day/Date/Time:		Location:	