

Funeral/Memorial Service Preferences



First Baptist Church

Aiken, South Carolina

Thank you for your caring initiative and thoughtful foresight in requesting this form. Please complete the sections which conform to your wishes. You may attach additional information, if you desire.

This information will be placed in file in the Pastor's office and kept confidential. If you wish, you may even place this form in a sealed envelope not to be opened until your death. You should feel free to update or revise the information.

As you consider these important matters, please be encouraged to speak with the Pastor. You may find it helpful to share a copy of your preferences with your family.

1. NAME _____ ADDRESS _____
TELEPHONE _____

2. **FUNERAL/MEMORIAL SERVICE**

A Funeral is a service in which the body of the deceased is present. A Memorial service is one in which the body of the deceased is not present (that is where the body has been donated to medical science, cremation, etc.). As you plan your service, remember that a Funeral or Memorial service is a service of worship whose purposes are:

- ✦ To give God thanks as the Creator, Redeemer, and Sustainer of life;
- ✦ To celebrate the life of the deceased;
- ✦ To aid family and friends in the mourning process; and
- ✦ To draw on our faith resources and the promise "that neither death nor life can separate us from the love of God in Jesus Christ our Lord" (Romans 8: 38-39).

3. **SERVICE PREFERENCE** (Please check one.)

- A. I prefer a Funeral Service.
I prefer a Memorial Service.
- B. I prefer a service at First Baptist Church.
I prefer a service at the funeral home chapel.
I prefer a graveside service only.
- C. I prefer my casket be covered with the church funeral pall.
I prefer my casket be covered with flowers.
- D. I wish to have a time for people to visit my family at the:
funeral home
church
other
-

4. **SCRIPTURE AND MUSIC PREFERENCES**

If possible, I would like the following Scripture passages to be read:

5. If possible, I would like for the following hymns and other instrumental music to be used:

6. I would like my service to include the following vocal music:

7. At my service, I would like for the congregation to sing:

8. **FLOWERS/MEMORIAL GIFTS**

Large quantities of flowers are not necessary in the Sanctuary. One or two arrangements may enhance the service without distracting from worship. Please check the appropriate box:

- I prefer to have flowers.
- I prefer, in lieu of flowers, to have memorial contributions made to First Baptist Church or to the following:

- I would like information about how I can remember God's work through my church in my will.

9. (If applicable) I prefer that the following funeral home/director handle the arrangements:

10. (If applicable) I prefer that my body be buried (indicate burial place, if known):

11. (If applicable) I prefer to be cremated and my ashes : (Please check one.)

buried at _____

scattered at _____

12. A. I have completed a will, and it is up to date.

B. I have completed a Living Will and a Durable Health Care Power of Attorney.

13. Additional detailed instructions or preferences, if desired:

14. A brief statement regarding your Christian pilgrimage or simply what Christ means to you.

Date: _____

Signature: _____

Witness: (optional): _____