

Basic Funeral Planning for Lutheran Church of Hope

Christian Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Location of Birth \_\_\_\_\_

Date of Death: \_\_\_\_\_ Location of Death \_\_\_\_\_

Date and Location of Baptism (*if known*) \_\_\_\_\_

Date and Location of Confirmation (*if known and applicable*) \_\_\_\_\_

Date and Location of Marriage (*if known and applicable*) \_\_\_\_\_

Do you already have funeral arrangements made?  
(*circle one*) YES NO

If yes, with what funeral home? \_\_\_\_\_

Will you be cremated? (*circle one*) YES NO

How do wish your remains (body or ashes) be disposed? (*circle one*)  
Burial Crypt Columbarium Ashes Spread At Sea

Do you already have arrangements for a final resting place made?  
(*circle one*) YES NO

If yes, where? \_\_\_\_\_

Will your body be donated to scientific and/or medical research?  
(*circle one*) YES NO

Do you wish to have a viewing/visitation prior to cremation and/or funeral liturgy?  
(*circle one*) YES NO

*Please turn over for Hymns and Scripture Reading Preferences*

## HYMNS AND SCRIPTURE

Usually there are 3-4 hymns sung for funerals. List any hymns you wish to have sung. If there are more than 4, please list them all.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Others:

Usually there are 2-3 lessons from Scripture, 1 Old Testament or Psalm, 1 New Testament, and a Gospel lesson. Are there any favorite scriptures you would like read? If you have more than 2-3, please list them, as they can be used at committal and/or viewing/visitation.

Old Testament Lesson or Psalm \_\_\_\_\_

New Testament Lesson \_\_\_\_\_

Gospel Lesson \_\_\_\_\_

Others: