

Final Arrangements Brochure

FUNERAL SERVICE PLANNING & BURIAL INFORMATION ST. ANDREW'S EPISCOPAL CHURCH

890 Balour Drive, Encinitas, CA 92024 (760) 753-3017 / contact@standrewsepiscopal.org

This brochure is designed for the person wishing to plan his or her own final arrangements. This important task is a great help to your family as well as a fulfillment of your own personal wishes.

YOUR PERSONAL INFORMATION Full Name: _____ Date of Birth: _____ City of Birth: ____ Current Address: City: ______ State: _____ Zip: _____ ☐ Member of St. Andrew's ☐ Member of (*church name if not St. Andrew's*): I have been: ☐ Baptized ☐ Confirmed ☐ I have a Durable Power of Attorney for Medical matters, and the contact info is: **NEXT OF KIN** 1) Name: Relationship: Phone: Cell Phone: Email: _____ Mailing Address: 2) Name: Relationship: Phone: _____ Cell Phone: _____ Email: _____ Mailing Address:

FUNERAL SERVICE INFORMATION

${\bf Mortuary/Cremation\ Society:}$

Contact Person:	
Address:	
Phone:	Email address:
Vigil at the Mortuary? ☐ Yes ☐ No	
Liturgy:	
Service to be held in the: □ Church □ Ch	napel Other:
□ Rite I □ Rite II Holy Eucharist	? □ Yes □ No
☐ Casket to be present ☐ Cremains (urr	n) to be present
Committal:	
☐ Graveside ☐ St. Andrew's Columbariu If in the St. Andrew's Columb	am □ Other: parium, has a Niche been purchased? □ Yes □ No
☐ I would like an inscription on Memorial Has the inscription been pure	
Altar Flowers:	
☐ No Flowers ☐ Provided by St. Andre	w's Altar Guild (flowers to be used at Sunday service)
☐ Provided by family (family will need to	be in contact with church office)
Names of Pall Bearers (if casket is presen	t):
1)	2)
3)	4)
5)	6)
Music:	
Do you want music to be included? ☐ Yes	□ No
Check your preference: ☐ Organist ☐ I	Pianist 🗖 Other:
Opening Hymn:	Sequence Hymn:
Closing Hymn:	<u> </u>
Communion Hymns (If there is a Eucharis	st):
Soloist contact information (if applicable):	F

Readings (at least one):		
Old Testament:	Reader:	
Psalm:	(read by congregation)	
Epistle:	Reader:	
Gospel (if a Eucharist, there must be	a Gospel reading):	(read by clergy)
Homily: □ Yes □ No		
Reception: □ Yes □ No		
☐ Parish Hall ☐ Other location	Everyone invited? ☐ Yes ☐ No)
Catered by (contact information):		
Memorial Donations:		
I would like memorial donations to b	e made to: 🚨 St. Andrew's Epis	copal Church
\Box Other (please specify):		
☐ I prefer people make donations in	lieu of flowers	
If so, to where? ☐ St. Andrew's	Episcopal Church	
\Box Other (please specify): _		
Bulletins:		
A simple service leaflet with your photo printed materials are going to be provid inform the office of their plans.		
OFFICE USE ONLY:		
Additional Notes:		