

Pallbearers:

Family Prayers: *(Usually at the Funeral Home)*

Do you request Family Prayers: ___ Yes ___ No

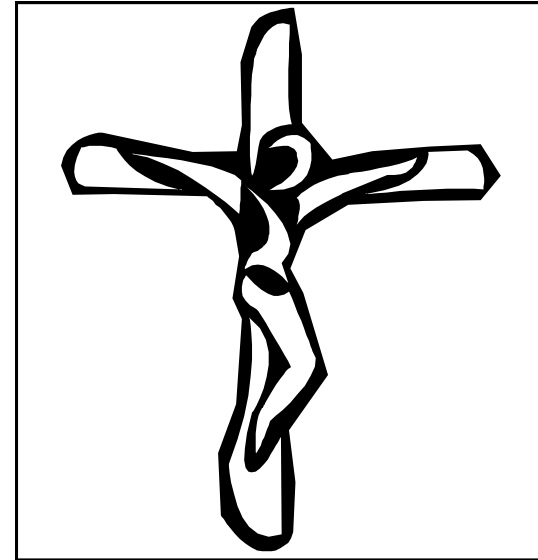
Time of Family Prayers: _____

Other Information:

Contact Name and Number:

The Funeral Liturgy

Planning



Parish of The Holy Innocents
P.O. Box 3228, Paradise, NL A1L 3W4

Rector: Rev Byron Barter 727-2081 (C)



www.holyinnocents.ca



782-3071 (office)



holyinnocents@nf.aibn.com

Personal Information

Full Name: _____

Date of Birth: _____

Date of Death: _____

Funeral Liturgy

Order of Worship: (Please circle one)

1. Book of Alternative Service (BAS)

_____ with Holy Eucharist

_____ without Holy Eucharist

2. Book of Common Prayer (BCP)

_____ with Holy Eucharist

_____ without Holy Eucharist

Bible Readings:

Old Testament: _____

Reader: _____

Psalm: _____

Reader: _____

New Testament: _____

Reader: _____

Gospel: _____

Reader: _____

The Prayers of the People: *(Preprinted and used only with the BAS)*

Congregational Hymns:

Liturgy with or without Holy Eucharist:

Opening Hymn: _____

Hymn before Gospel : _____

Closing Hymn: _____

Liturgy with Holy Eucharist:

Hymn as the Table is prepared: _____

Communion Hymns: _____

Cemetery Hymn:

Other Musical or Singing Selections (ie. Solo):

Name of Singer/s: _____

Name of Musician/s: _____

Gift Presenters: *(Liturgy with Holy Eucharist)*

Tribute:

Will you be having a Tribute: _____ Yes _____ No

Name of person reading the Tribute: _____