



DEACON FUNERAL PRE-PLANNING SHEET FOR _____

Full Name of Deacon _____

Telephone Number (Home/Cell) _____ E-mail _____

Parish where currently serving-

Next of Kin-

Parish _____

Name _____

Relationship _____

Pastor _____

Address _____

City _____

Telephone _____

Telephone _____

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***I. Attire***

I wish to be buried in: \_\_\_\_\_ Liturgical vesture \_\_\_\_\_ A suit

***II. Viewing/Solemn Vespers***

Location

Church: \_\_\_\_\_

Funeral Home: \_\_\_\_\_

Calling Hours: \_\_\_\_\_

Presider: \_\_\_\_\_

Homilist: \_\_\_\_\_

***III. Funeral Mass***

Location:

Church: \_\_\_\_\_

Homilist: \_\_\_\_\_

Deacon of the Word: \_\_\_\_\_

Deacon of the Eucharist: \_\_\_\_\_

Deacon Chaplains: \_\_\_\_\_

Lectors: \_\_\_\_\_

\_\_\_\_\_

