



Toronto Perth Seventh-day Adventist Church Funeral/Memorial Service Information Form

Information About Deceased

Name of Deceased: _____ Member of our Church? Y or N _____

Date of Birth MM/DD/YYYY: _____ Date of Passing MM/DD/YYYY: _____ Preferred final service date MM/DD/YYYY: _____

Family Contact Information

Family Contact: _____ Telephone #: _____

Address: _____ Email: _____

Funeral Home Information

Funeral Home: _____ Internment Location: _____

Contact Person: _____ Telephone #: _____

Order of Service Information

Do you have family, friends or church members considered for some or all of the following items?

Requested Officiating Pastor(s): _____ Music and/or Video Prelude: _____

Scripture Reading: _____ Eulogy: _____

Special Music _____

Tribute: _____

Other Item(s): _____

Pallbearers: _____

For Office Use Only

Confirmed Date of Service		Deacons/ Greeters Req'd?	
Other Requests?		Bulletins: Funeral Home or Church?	

"Blessed are those who mourn, for they will be comforted" Matthew 5:4