

St. Martin Lutheran Church
10995 Canada Road - Birch Run, MI 48734

**FUNERAL PLANNING GUIDE
TO HELP YOUR FAMILY**

A copy of this information will be filed at St. Martin. Your copy should be kept with other important papers. If you would like assistance with this form pastor or an elder would be glad to help.

Full Name: _____

Address: _____

Phone: _____

Email: _____

Pre-Arrangements

Visitation (Please indicate where, how long and when you would like your visitation. Please know that having your visitation at the church is an option).

Handling of the Remains

1. Burial or cremation. (Please circle one)
2. Cemetery _____ (If one not chosen, please indicate)
3. If you are being cremated, what are your instructions for the ashes?

Funeral Service

1. I would like my service to be at (St. Martin, Funeral Home, other) _____
2. Scripture Readings (Please pick at least three).
A. _____ D. _____
B. _____ E. _____
C. _____ F. _____

3. Service Music (Please choose hymns or other appropriate music).

4. Would you like additional musicians, if so, anyone in particular?

5. Please indicate the recipient(s) of any memorial gifts. _____

Personal Information

Please use the additional space (and include other information at your discretion), to add anything you would like to be shared during your service. Know that this information is a gift to your family. When we review this, you will be safely in the arms of Christ while we continue our pilgrimage with tears.

OBITUARY INFORMATION

Date of birth _____ Place of birth _____

Father _____ Date of Baptism _____

Mother (include maiden name) _____

Name of spouse (include maiden name) _____

Marriage Date _____ Place of marriage _____

If spouse is deceased, date _____

Children

Grandchildren

Other Family to be mentioned

Education (Name and location of school(s))

Employment History (Name, location, years of service)

Other Memberships (Please include military service here)

Hobbies / Interests