

FUNERAL INFORMATION

ST. BARNABAS CHURCH
3955 Orange Ave., Long Beach, CA 90807
(562) 424-8595

DAY/DATE: _____
TIME: _____

(Please verify with/Mortuary)

CASKET: URN:

NAME OF DECEASED: _____ AGE: _____

ADDRESS: _____
City State ZIP

DATE OF BIRTH: ____/____/____ DATE OF DEATH: ____/____/____

INFORMAT / CLOSE RELATIVE (NAME): _____ PHONE #: _____

TYPE OF RELATIONSHIP: _____ E-MAIL: _____

Contact Name: _____

NAME OF MORTUARY: _____ PHONE #: _____

City

VIGIL: _____ TIME: _____

(Rosary) Day/Date AM / PM Priest/Deacon Phone #: _____

MORTUARY:

CHURCH:

or Other

MASS: _____ TIME: _____

Day/Date AM / PM Priest/Deacon Phone # _____

MORTUARY:

CHURCH:

MEMORIAL MASS:

(i.e. 1-year death anniv, etc.)

NAME OF CEMETERY

AND ADDRESS: _____

GRAVESIDE SERVICE: TIME: _____

AM / PM Priest/Deacon Phone # _____

MUSIC:

MUSICIAN & E-MAIL: _____ PHONE #: _____

*Music fee is separate. Price is determined upon agreement of both parties.

*Payment for music is given directly to Musician(s).

NOTES: _____

*CHURCH/PRIEST FEE: \$300.00 MINIMUM CASH CHECK

GIVEN BY:	MORTUARY	\$	\$
(check one)	FAMILY	\$	\$

CHECK # _____

*GRAVESIDE SERVICES: \$100.00 MINIMUM

CASH	\$	CHECK	\$
(leave blank if not needed)		CHECK #	

OPTIONAL PURCHASE OF MEMORIAL PLAQUE: \$50.00

Plaque is placed in our Memoriam Room. (Provide order form, if requested)

CASH	\$	CHECK	\$
		CHECK #	

OTHER COSTS/MISC: _____

LIST NAME IN BULLETIN:

[STAFF USE ONLY] REF. PAGE

RECORDED BY: _____

DATE: ____/____/____

[OVER]

LITURGY PLANNING GUIDE

FUNERAL MASS: OR MEMORIAL MASS:

DAY/DATE:

TIME:

NAME OF DECEASED: _____

PRESIDER: _____

MUSIC: MUSICIAN (S): _____

INTRODUCTORY RITES

PLACING OF PALL: LANGUAGE: _____

GATHERING SONG: _____

LITURGY OF THE WORD

FIRST READING: Text _____ Reader: _____

RESPONSORIAL PSALM: _____ Reader: _____

RESPONSE SUNG READ (optional) Reader: _____

SECOND READING: Text _____ Reader: _____

GOSPEL: [Presider's Choice] _____

GENERAL INTERCESSIONS: _____ Reader: _____

LITURGY OF THE EUCHARIST

PRESENTATION OF GIFTS: (2 people minimum Names: _____

OFFERTORY SONG: _____

COMMUNION SONGS: _____

EULOGY: (Limited to 5 Minutes) Names: _____

RECESSIONAL SONG: _____

CEMETERY LOCATION: _____

ADDITIONAL COMMENTS: _____
