



Funeral Pre-Planning Form
St. Stephen's Episcopal Church
Richmond, Virginia
804.288.2867

Today's date

Your Full Name

Address

City

State

Zip

Email address

Phone (with area code)

The person responsible for carrying out plans for my funeral and burial

Name and relationship

Address

City

State

Zip

Email address

Phone (with area code)

Funeral home

Visitation

yes
no

If yes, location:

Residence

Church

Funeral Home

Casket or cremation:

If casket and you would like to designate pall bearers, list eight below.

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

Burial place

I do own a plot

I do not own a plot

Type of service

-
- Rite One Burial Office in church with Communion without Communion
 Rite Two Burial Office in church with Communion without Communion
 Celtic Service in church with Communion (*additional fees for set up, musicians*)
 Graveside only without Communion
-

Readings (customarily 2-3 readings)

From the Old Testament

From the Psalms

From the New Testament (Epistles)

From the Gospels

Non-biblical reading

Hymns* (customarily 2-3 hymns)

1.

2.

3.

Other music*

Flower requests at the altar*

Desired participants or other requests

Reception following the funeral should take place at:

Residence (provide address)

Church

Other:

In lieu of additional flowers, contributions may be made to:

I would like the service to be livestreamed
and/or recorded.

Hosted at ststephensRVA.org/memorialstream

yes
 no

The Legacy Society

I am a member of the St. Stephen's Legacy Society

I would like information on joining the St. Stephen's Legacy Society

*For items with an asterisk, see attached honoraria sheet.