

Service of Resurrection Planning Guide



If we live, we live to the Lord, and if we die, we die to the Lord; so then, whether we live or whether we die, we are the Lord's.

Romans 14:8

Personal Information			
NameFirst	Middle Initial o	r Name	Last
Preferred Name (if applicable)	First	Middle Initial or Name	Last
Address		_ City/State	Zip
Phone	_ Email _		
Date of Birth	_ Place of Birth		
Date and/or Church of your Baptism	1		
Children/Next of Kin			
Please list names, addresses, phone num	bers, and email addresses.		
At Time of Death			
Do you have a will? Yes 1	No Location _		
Lawyer			
Organ Donor? Yes No _			
professional memberships,			
Funeral Home to be Used			
Would you like Visitation? Yes	No At Ch	urch or Funeral Home?	

At Time of Death (continued) Cremation **Traditional Burial** Please select one: Please select one: Cremation and the urn present for visitation Body and casket present for visitation and the service Body and casket present for the visitation, but not the Cremation and the urn present for the visitation, service but not the service Body and casket present for the service, but not the Cremation and the urn present for the service, visitation (please select this option if not having visitation) but not the visitation (please select this option if not having visitation) Body and casket present for visitation and the service Cremation, urn not present Body and casket present, cremation to follow If cremation, please indicate if ashes will be Please note the place and date of interment. interred or scattered. Please note the place and Please indicate the cemetery name, location, and date of scattering or interment, if known. plot number, if known. **Planning Your Service of Resurrection** Service conducted at _____ Scriptures: Hymns: Old Testament _____ Entrance Hymn _ (Opening) Pulpit Hymn __ (Before/After Sermon) Recessional Hymn _ (Closing) Special Music _ Vocal/Instrumental Remembrances/Eulogy _____ If using a casket: Pall Bearers _ Yes _ (White covering for casket or urn, symbolizing a baptismal garment) Honorary Pall Bearers (if any) **Planned Giving** Memorial Gifts Directed to: Normandale Lutheran Church (Suggested gift to cover 3-5 years of your annual giving) Normandale Lutheran Church Foundation (Legacy Gift) I would like a personal visit to discuss my planned giving in more detail Other Information __ Dated this Day _____

Signature ___



For you have already died, and your life is hid with Christ in God. Colossians 3:3