

**OUR MOTHER OF MERCY CATHOLIC CHURCH**

**Fort Worth, Texas 76104**

**Funeral Arrangement**

**Date of Arrangement:** \_\_\_\_\_

**Name of Deceased:** \_\_\_\_\_

**Birthdate:** \_\_\_\_\_ **Date of Death:** \_\_\_\_\_ **Age of Deceased:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**The closest family members:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Received the Sacrament of the Sick:** \_\_\_\_\_ **Yes** \_\_\_\_\_ **No**

**Contact Information:** \_\_\_\_\_

**Undertaker:** \_\_\_\_\_

**Date and time of Wake Service:** \_\_\_\_\_

**Date of Burial:** \_\_\_\_\_

**Date and Time of Mass:** \_\_\_\_\_

**Place of Burial:** \_\_\_\_\_

**Music?** \_\_\_\_ **Yes** \_\_\_\_ **No:** Which readings? \_\_\_\_\_

**Who will read?** \_\_\_\_\_

**Few Words about your loved one:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Attending Priest:**

\_\_\_\_\_