

Alden-Waggoner Funeral Chapel
~ Obituary Information ~

General Information

Photo: ___Yes ___No

Names of paper(s) to publish: _____

Name of deceased (as it is to appear in obituary):

Date of birth: _____ Age: _____

Place of birth: _____

City and state of residence of deceased: _____

Parents' names (include mother's maiden name): _____

Date, day, and time of service: _____

Location of service: _____

Person officiating and the church/organization he/she is from: _____

Cemetery: _____

Life History, etc...

Schooling: _____

Spouse: _____

Date and location of marriage: _____

Areas where resided: _____

Employment: _____

Hobbies: _____

Special interests: _____

Memberships (religious, social, fraternal, volunteer, civic, or business organizations): _____

Survivors: include spouse, children (and their spouses if desired), siblings, grandchildren (number or names if desired), and other family members. Please add city and state of residence of the primary family members):

Preceded in death by: _____

Memorials are suggested to: _____

Viewing date and time: _____

NOTE: Obituary information and picture is needed at the Alden-Waggoner Funeral Chapel by 1:00 pm the day before it is to appear in the paper. If you wish to submit an obituary by e-mail, please use the following address: awfc@aldenwaggoner.com