

Phone #
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Email:
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Program Outline

Name: _____

Service Day and Date: _____

Place of Service: _____

Time of Service: _____ Viewings: _____

Conducting/ Officiating: _____

Family Prayer: _____

Pianists/ Organists: _____ Chorister: _____

Opening Song / Hymn: _____

Opening Prayer/ Invocation: _____

Eulogy/ Obituary: _____

Speakers: _____

Musical Selection: _____

Accompanied by: _____

Speakers: _____

Remarks: _____

Musical Number: _____

Closing Remarks: _____

Closing Song: _____

Closing Prayer/ Benediction: _____

Casket Pallbearers: (6-8) _____

Honorary Pallbearers: _____

Dedication of Grave: _____

Cemetery Name: _____

Compassionate Services _____