

Program Writing Guide

Return at least 2 days prior to the date of the funeral service. E-mail a photo or scan to SOMortuary@gmail.com or bring it to the mortuary between 9 a.m.

In Loving Memory of

Name: _____

Born: _____ Died: _____

Services

Date & Time: _____

Address: _____

Pallbearers

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

Honorary Pallbearers

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

Interment

Cemetery: _____

Dedicatory Prayer by: _____

Relationship to the decedent: _____

Services

Conducting: _____

Family Prayer: _____ Relationship: _____

Organist: _____

Chorister: _____

Opening Hymn #: _____ Title: _____

Invocation: _____ Relationship: _____

Life Sketch: _____ Relationship: _____

Musical # by: _____ Relationship: _____

Name of piece: _____

Accompanist _____ Relationship: _____

Speaker: _____ Relationship: _____

Speaker: _____ Relationship: _____

Musical # by: _____ Relationship: _____

Name of piece: _____

Accompanist: _____ Relationship: _____

Speaker: _____ Relationship: _____

Closing Remarks: (usually conductor) _____

Closing Hymn #: _____ Title: _____

Benediction by: _____ Relationship: _____

