

The West Milford Presbyterian Church
~ Funeral Information ~

Date Requested for the Service _____

Full Name : _____ Other Names Used: _____

Address: _____

(Town) (State) (Zip Code)

Children:

1. _____ 2. _____

3. _____ 4. _____

Siblings:

1. _____ 2. _____

3. _____ 4. _____

Parents (Living) _____

I would prefer Visitation at the Funeral Home _____ or the church _____

I would prefer an open casket _____ or a closed casket _____

I would prefer direct cremation _____

Military Ceremony _____ Branch and dates served _____

Lodge Ceremony (Lions, Elks, Rotary, etc.) _____

Contact person and Phone # _____

Liturgical Information for the service:

Scripture Readings: _____

Hymns: _____

Special Music: _____

Other Request for the Service: _____

In lieu of flowers, I prefer donations go to: The Church _____ Or a Charity _____

Compensation: Pianist \$125.00

Pastor \$300.00