ST HELEN PARISH FUNERAL/MEMORIAL MASS PREPARATION SHEET NOTE: Readings and song/hymn suggestions not included in the Lectionary and our Ritual Song hymnal must be approved in order to ensure the integrity of the liturgy. Revised 7/5/22 Bereavement Minister and phone: 1. Name of Deceased: _____ DOB _____ DOD ____ (full name as it should appear on program) 2. Date and Time of Funeral: ______ 3. Visitation at St. Helen No ____ Yes _____ 4. Contact Person/Phone #: _____ SPECIAL INSTRUCTIONS/NEEDS 5. Principal Mourners: 6. Approximate # of Attendees: _____ 7. Est. # Receiving Communion _____ 8. Eulogy: No Yes 9. Eucharistic Minister(s) in addition to presider: 10. Deacon Yes ___ No ___ 11. Will family help with the pall: Yes ___ No ___ 12. Will family member read petitions: No ____Yes _____ 13. Mourners processing with gifts: ______ **SCRIPTURE SELECTIONS:** Please include lectionary numbers if possible 1st Reading _____ Read by _____ Responsorial Psalm 2nd Reading _____ Read by _____ HYMNS/SONGS (ALL SPECIAL REQUESTS MUST BE APPROVED) Ave Maria after Communion Yes ____ Communion: Entrance: _____ Preparation: _____ Recessional: _____ Funeral Mass with Body ____ Funeral Mass with Cremains ____ Memorial Mass (no body or cremains) ____ Outside of Mass ___ Funeral Home Program Cover # Program Cover # Each year in November, we remember all of those who have died this past year. In order to notify the family of the deceased loved one, please list up to two family members to whom we can mail an invitation to the liturgy Name and relationship Address