

# FUNERAL/MEMORIAL SERVICE INSTRUCTIONS



## SECOND PONCE DE LEON BAPTIST CHURCH

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*Atlanta, Georgia*

You may wish to talk with one of your ministers as you consider these important matters. Please complete the sections which conform to your wishes. Additional information may be attached if you so desire. Please return this form to the Associate Pastor's Office at Second-Ponce de Leon Baptist Church, Atlanta. A copy will be retained on file.

**Section 1: Your Information**

Name \_\_\_\_\_ Address \_\_\_\_\_  
Telephone \_\_\_\_\_

**Section 2: The Distinction Between a Funeral and a Memorial Service, and the Intent of These Services**

A *Funeral* is a service in which the body of the deceased is present, whereas a *Memorial Service* is one in which the body of the deceased is not present (i.e., where the body has been donated to medical science, cremation, etc.).

As you plan your service, remember that both Funerals and Memorial Services are times of worship ...

- ◆ to give God thanks as the Creator, Redeemer, Sustainer of life;
- ◆ to celebrate the life of the deceased;
- ◆ to aid family and friends in the mourning process;
- ◆ to draw on our faith resources and the promise "that neither death nor life can separate us from the love of God in Jesus Christ our Lord." (Romans 8)

**Section 3: Your Service Preferences (please check one box for part A and one box for part B)**

- A.  I prefer a Funeral Service.  
OR  
 I prefer a Memorial Service.
- B.  I prefer that my body be donated to medical science.  
OR  
 I prefer that my body *not* be donated to medical science.

**Section 4: Your Scripture Preferences**

If possible, I would like the following scripture passages to be read: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section 5: Your Music Preferences**

If possible, I would like for the following hymns/special music to be used: \_\_\_\_\_

**Section 6: Flowers/Memorial Gifts**

Large quantities of flowers are discouraged in the Sanctuary or Chapel. One or two arrangements may enhance the service without distracting from worship. Please check the appropriate box:

- I prefer to have flowers.
- I prefer, in lieu of flowers, to have memorial contributions made to Second-Ponce de Leon Baptist Church or to the following:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Section 7: (Check, if applicable) Your Funeral Home/Director Preference**

- I prefer that the following Funeral Home/Director handle the arrangements:

\_\_\_\_\_

**Section 8: (Check, if applicable) Your Burial Place Preference**

- I prefer that my body be buried (indicate burial place, if known):

\_\_\_\_\_

\_\_\_\_\_

**Section 9: (Check, if applicable) Your Cremation Preferences**

I prefer to be cremated and my ashes (*please check one*):

- buried at \_\_\_\_\_
- scattered at \_\_\_\_\_

***Section 10: Your Obituary***

Is there special information you wish to have included in your obituary?

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***Section 11: Other Instructions***

Additional detailed instructions or preferences if desired:

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***Section 12: Your Christian Pilgrimage***

A brief statement regarding your Christian pilgrimage or simply what Christ means to you.

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Signature: \_\_\_\_\_

Witness (*optional*): \_\_\_\_\_

Date: \_\_\_\_\_