



FUNERAL LITURGY PLANNING SHEET

Church of Saint Gabriel the Archangel

Please use this form to make selections for the readings and ritual in the Funeral Mass.

Name of the Deceased _____

Date of Death: _____

Funeral Home _____

Family Contact: _____

Phone Number(s): _____

Address: _____

City: _____ State: _____ Zip code: _____

Email address: _____

Funeral Date: _____ **Day of Week:** _____ **Time:** _____

Presiding Priest _____ Deacon _____

Other Clergy _____

Altar Servers: Family to provide _____ Church to provide _____

LITURGY PLANNING

Part I: Introductory Rites

Greeting and Sprinkling with Holy Water

Placing of the Pall

By funeral directors _____ By family members or friends _____

If the latter, please list names: _____

Placing of Christian Symbols (optional): A symbol of the Christian life, such as a favorite prayer book, a Bible, or a cross, may be carried in procession, then placed on the coffin.

Christian Symbol(s) _____

Placed by _____

Part II: Liturgy of the Word

Readings selections are found in the book *Through Death to Life* (given by the parish), or can be found under documents for the quick link to funerals on the parish website.

Reading I: Choose one.

Reading I: _____

Read by _____

Responsorial Psalm: Choose one. (sung by the cantor)

Psalm: _____

Reading II: Choose one.

Reading II: _____

Read by _____

Alleluia Verse: Choose one.

Verse: _____

Gospel: Choose one.

Gospel: _____

Homily

Petitions: Please check with celebrant about any special Peititions.

Read by _____

Part III: Liturgy of the Eucharist

Preparation of the Gifts

Brought forward by whom:

Eucharistic Ministers provided by family: Yes ____ How many ____ No ____

Part IV: Final Commendation (if the body or cremains are present)

Any other particular arrangements need to be discussed with the celebrant?

MASS OF REMEMBRANCE

Each year in November, St. Gabriel celebrates our Mass of Remembrance to pray for those who have died. We invite you to come as a family to this celebration. A reception will be held in the school cafeteria immediately following the Mass. Through this beautiful liturgy we would appreciate the honor of walking with you, if only for this brief time. We hope this will be a very moving and healing experience.

Please provide your contact information **if different from Page 1**, so we can send you an invitation in advance of the celebration.

Name of Deceased: _____

Family Contact: _____

Phone: _____

Address: _____

City: _____ State: _____ Zip code: _____

Email address: _____

* Revised July 2021