

Funeral/Memorial Service Planning

Metropolitan Community Church of Toronto

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Senior Pastor

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Funeral / Memorial Service Information Sheet

Date this form was completed: _____

Full name: _____

Name to be used in the service: _____

Date of birth: _____ Date of death: _____

Executor's name: _____

Phone numbers: () _____ - _____ res. () _____ - _____ bus.

Power of Attorney's name: _____

Phone numbers: () _____ - _____ res. () _____ - _____ bus.

Date of service: _____ Time: _____

Location: _____

Funeral Home: _____

Contact person: _____

Visitation Dates & Times, and other details: _____

Burial Cremation

Committal location: _____ Date/Time: _____

Flowers

Flowers left for Sunday Service

Dedication in Sunday News/Announcements

How to refer to Lover, Cause of Death, etc: _____

Key Family members, friends to be present: _____

Key groups likely to be present: _____

Photographs present: One Photograph Collage of Photographs

Pall Bearers Names: (correct spelling) _____

Others to involve in service (ushers, etc...) _____

Number of Orders of Service required: _____

How many seats to be reserved: _____ where? _____

Death register form completed and attached

Metropolitan Community Church of Toronto

For Office Use Only
Number

D E A T H
Register Information

(*Please Print*)

Name: _____
(Last) (First) (Middle)

Residence : _____
(Street Address) (Apt#)

(City) (Province) (Postal Code)

Gender: Male Female

Date of Birth _____
(Day/Mth/Yr)

Date of Death _____
(Day/Mth/Yr)

Funeral Services Held At:

Place of Burial: _____ Date of Burial _____
(Day/Mth/Yr)

Parents: _____
(Last) (First) (Middle)

(Last) (First) (Middle)

Spouse: _____
(Last) (First) (Middle)

Officiating Clergy/Presider: _____

Comments: _____

*COMPLETE FORM AND RETURN TO THE OFFICE OF THE SENIOR PASTOR
AS SOON AS POSSIBLE*

Complete Service? yes no
If internment later, presider requested? yes no
Invite people to come to front at end of service? yes no
Invite people to come to reception? yes no

If yes, location: _____

Memorial Donation Info: (name of organization and address)

include MCCT donation info? yes no

Notes: _____

Funeral / Memorial Services Summary of Costs

Presiders Honorarium: -suggested minimum \$150 donation
(payment in cash is requested)

Funeral/ Facilities Assistant:
-\$75, (\$100 if there is a reception at MCCT)
-will be here 1 hour before and 1 hour following the service or until the end of the reception if there is one.
his does not include cleanup.
(payment in cash is requested)

Audio Technician: -\$75 is suggested

Organist / Pianist / Soloist: -fee is set by individual musicians.
Musician information is available upon request.

Caterers: -Caterer information is available.
-fee is set by individual companies

All Of The Above Are To Be Paid In Cash Or In Separate Cheques
Made Out To The Individuals, Not MCC Toronto.

Room rates:

Sanctuary - \$100+HST
Social Hall or Room 109 - \$150+HST

Room Rates May Be Paid BY Cash or Cheque made out to
"Metropolitan Community Church Of Toronto"

*(RATES QUOTED ARE EFFECTIVE June 1, 2011
and are SUBJECT TO CHANGE WITHOUT NOTICE)*

Notes for Individual Pre-Planning their Funeral

(this form should be kept with your legal documents)

Full Name: _____

Date form completed: _____

Additional Issues when pre-planning your own funeral/memorial service

(Remember that funeral/memorial services are for the living)

Ensure that a list of important contact numbers is in a place where they will be easily located in the event of emergency/death. *(name & contact info)*

Emergency contact: _____

Next of Kin: _____

Executor: _____

Power of Attorney: _____

Doctor: _____

Church: _____

Clearly indicate the executor and contact information:-

Clearly indicate if your service has been pre-planned and if so, where the appropriate documents may be located. _____

Clearly state any information you would like included in your Obituary.

Arrangements have been/will be made with the following funeral home:

(name address & phone #)

Memorial Donations to: _____

(organization/address)

Signature: _____ **Date:** _____

Sample Order of Service:

(this is printed on 8.5x11 paper, double-sided and folded)

pg. 1 Cover:

*A Celebration of
the Life of
Name Here*

PHOTO HERE

Date of Birth - Date of Death

Date/Time of Service

Celebrant: Insert Name Here

Eulogy: Insert Name Here

Pianist: Insert Name Here

Soloist: Insert Name Here

Metropolitan Community Church of Toronto
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pgs 2 & 3. INSIDE FOLD

PRELUDE

“Title of Song”

WELCOME & INVOCATION

CALL TO WORSHIP

Leader: I am Resurrection and I am Life, says God. Whoever has faith in me shall have life even though they die.

People: And everyone who has life, and have committed themselves to me in faith, shall not die forever.

L: As for me, I know that my Redeemer lives and that at the last day will stand upon the earth. After my awaking, God will raise me up; and in my body, I shall see God.

P: I myself shall see, and my eyes behold God who is my friend and not a stranger.

L: For none of us have life in ourselves, and none become their own master when they die. For if we have life, we are alive in God, and if we die, we die in God.

P: So, then, whether we live or die, we are God's.

L: Happy from now on are those who die in God!

P: So it is, says the Spirit, for they rest from their labours.

SPECIAL MUSIC (can be CD if requested)

“Title of Song”

READING (Scripture or other suitable)

EULOGY

Insert Name(s) here

SHARING OF STORIES (if requested instead of Eulogy)

PRESIDER'S REFLECTIONS

COMMUNITY PRAYER (concluding with Psalm 23)

The Lord is my shepherd; I shall not want.

You make me lie down in green pastures; you lead me beside still waters.

You restore my soul;

you lead me in paths of righteousness for your Name's sake.

Though I walk through the valley of the shadow of death,

I shall fear no evil, for you are with me;

your rod and your staff, they comfort me.

You spread a table before me in the presence of my enemies;

you anoint my head with oil, and my cup overflows.

Surely your goodness and mercy shall follow me all the days of my life

And I will dwell in the house of the Lord forever.

PRAYER OF CONSECRATION (if a church funeral and having communion)

ADMINISTRATION OF COMMUNION (if a church funeral)

SPECIAL MUSIC (can be CD if requested)

“Title of Song”

COMMITTAL PRAYER (if “complete” service)

BENEDICTION

POSTLUDE

“Title of Song”

Pg4. BACK COVER

*Memorial Donations
are welcome to:*

***“Insert Name & Address of
Organization Here”***

*A reception following the service will be held
at **Insert Location Here***