Dobbs Ferry Lutheran Church
43 Ashford Avenue, Dobbs Ferry, NY 10522
914-693-0810

OFFICE USE ONLY:

□ Obituary Printed
□ Church Records Updated

REQUEST FOR FUNERAL

Name of Person Completing This Form: _____
Relationship to the Deceased: _____

DECEASED'S INFORMATION
Full Name:
_____
Address (at Time of Death):
_____
City: _____ State: ____ ZIP: _____

Date of Birth: _____
Date of Death: _____

Church Membership: _____

FAMILY MEMBER CONTACT INFORMATION
Name: _____
Address: _____
City: _____ State: ____ ZIP: _____

Cell Phone: _____
Landline: _____
Which is the preferred number? _____

LIVING RELATIVES
Spouse's Name: _____

Children's Names: _____
_____
_____

Siblings of Deceased: _____
_____
_____

Other Relatives: _____
_____
_____

PREDECEASED BY
(please include relationship)
_____
_____
_____

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FUNERAL / MEMORIAL SERVICE PLANS
Date: _____
Time: _____

Funeral Home: _____
Address: _____
_____

Funeral at the Church or Funeral Home?
_____

Cremation? _____ yes _____ no

Pall Bearers: _____
_____

Speakers: _____
_____
_____

Scripture Passages: _____
_____
_____

Songs/Hymns: _____
_____
_____

Any Special Requests: _____
_____
_____