

FUNERAL SERVICE INFORMATION

(Note: This is only a sample. If your programs varies, please add or delete information as needed. If your service is at a church, please approve it with your Bishop or Clergy.)

FUNERAL SERVICES FOR: _____

OFFICIATING OR CONDUCTING: _____

PRELUDE & POSTLUDE MUSIC: _____

FAMILY PRAYER: _____

OPENING MUSICAL SELECTION: (HYMN # OR TITLE) _____

ACCOMPANIED BY: _____

OPENING PRAYER: _____

MUSICAL SELECTION: (TITLE) _____

BY: _____

ACCOMPANIED BY: _____

TRIBUTE OR LIFE SKETCH: _____

MUSICAL SELECTION: (TITLE) _____

BY: _____

ACCOMPANIED BY: _____

SPEAKER: _____

REMARKS: (BISHOP OR CLERGY) _____

MUSICAL SELECTION: (TITLE) _____

BY: _____

ACCOMPANIED BY: _____

BENEDICTION: _____

PLACE OF BURIAL: _____

DEDICATION OF THE GRAVE: _____

PALLBEARERS: (6 OR 8 RECOMMENDED)

_____	_____
_____	_____
_____	_____
_____	_____

HONORARY PALLBEARERS: (IF ANY)

_____	_____
_____	_____
_____	_____
_____	_____

***PLEASE NOTE: RETURN THIS INFORMATION TO THE MORTUARY FOR PRINTING BY NOON THE DAY PRIOR TO THE FUNERAL SERVICES.**

IF YOU HAVE ANY QUESTIONS PLEASE CALL OUR OFFICE.

IF IT IS MORE CONVENIENT TO FAX OR E-MAIL THE INFORMATION, OUR FAX NUMBERS AND E-MAIL ADDRESSES, ARE LOCATED BELOW.

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