



Ministry of Consolation

Worksheet



Ministry of Consolation Worksheet

Name of Deceased: _____

Date and Time of Funeral Mass: _____

1st Reading: _____ Read by: _____

2nd Reading: *(optional)* _____ Read by: _____

Gifts to be brought forward by: _____

Opening Hymn: _____

Preparation Hymn: _____

Communion Hymn: _____

Closing Hymn: _____

Any other special remarks: _____
