

Funeral Questionnaire

St. Clement of Rome

Office of Liturgy & Worship (586) 752-6984 • Fax (586) 752-1601

Name _____ Nick names _____

Funeral Date & Time _____

Family Contact _____ **Phone Number** _____

Date of Birth _____ Date of Death _____

Birthplace _____

Last Residence _____

Spouse _____

Where were they married? _____ For how long? _____

Number of Children _____ Grandchildren _____

Occupation _____ Military Service _____

Were there any hobbies or special interests?

Were they involved in any community or church groups?

Was there a favorite saying?

Was there a favorite bible verse, poem or song?

What qualities do you remember most?

Please share some favorite family memories

Is there anything else you would like to share?
