



# St. Ann's Parish and It's Missions

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## Funeral Information Form

Name of Deceased on Record of Birth Certificate : \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Death: \_\_\_\_\_

Age of Deceased: \_\_\_\_\_ Parishioner: Yes \_\_\_\_\_ No \_\_\_\_\_

Address: \_\_\_\_\_ City, State & Zip: \_\_\_\_\_

Name of Parish Registered: \_\_\_\_\_

Cause of Death(Special Circumstances): \_\_\_\_\_

Sacraments Person has Received:      Baptism \_\_\_\_\_ First Communion \_\_\_\_\_ Confirmation \_\_\_\_\_

Marriage \_\_\_\_\_ Anointing of the Sick \_\_\_\_\_

Name of Person making Arrangements: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_

**\*Due to limited space and capacity of the Church, No Vigil Services will be permitted.**

**St. Ann's and Assumption Chapel will be used with the following agreement.**

**Person making arrangements must inform all visitors of these terms:**

- All Visitors are invited to Pray in the Church.
- No Entertainment (Party Beverages) other than Water will be permitted inside and outside the Church Premises.
- This is a time of Respect and Silence for Prayer for the Deceased and Family members.

Religious Music may be introduced upon approval of Priest.

Music must be pertaining to the Mass. We can give to you Church Cantors contact information.

Funeral Mass Arrangements are to be made by the Parish Office.

Funeral Mass Donation: Parishioner \$ \_\_\_\_\_ Non-Parishioner: \$ \_\_\_\_\_

Graveside Services \$ \_\_\_\_\_ at: \_\_\_\_\_

Use of Church building with another Priest celebrating the Mass: \$ \_\_\_\_\_

**Funeral Date: Date: \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_**

**Name of Priest Celebrating Mass: \_\_\_\_\_**

**Internment at: \_\_\_\_\_**

**Recorded: Page \_\_\_\_\_ Document \_\_\_\_\_ by: \_\_\_\_\_**

**Information Sheet**

**Name of Deceased :** \_\_\_\_\_

**Age:** \_\_\_\_\_

**Residence Address:** \_\_\_\_\_

**Family:**

**Husband / Wife:** \_\_\_\_\_

**Living** \_\_\_\_\_ **Deceased** \_\_\_\_\_ **How Long Married:** \_\_\_\_\_

**His/Her**

**FAITH PRACTICE:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**His/Her - Career/Occupation** \_\_\_\_\_

**Names of Children:**

**(Son / Daughter)** \_\_\_\_\_

**(Son / Daughter)** \_\_\_\_\_

**(Son / Daughter)** \_\_\_\_\_

**(Son / Daughter)** \_\_\_\_\_

**(Son / Daughter)** \_\_\_\_\_

**(Son / Daughter)** \_\_\_\_\_

**(Father)** \_\_\_\_\_

**(Mother)** \_\_\_\_\_

**(Brother/Sister)** \_\_\_\_\_

**(Brother/Sister)** \_\_\_\_\_

**(Brother/Sister)** \_\_\_\_\_

**(Brother/Sister)** \_\_\_\_\_

**(Brother/Sister)** \_\_\_\_\_