

Covid-19 Officiant Preference Form

Officiant Name: _____

Email: _____

Phone: _____

Do you wish to come to the funeral home for the arrangements? yes no

If not, what is the best way for the officiant to meet with the family prior to the service?

Service at the Church:

How many people will be at maximum capacity for the church? _____

The maximum people at the church shall be determined and regulated by:

(parish staff, family, etc.) _____

Will masks be required to enter the church? yes no

Will the service need to be listed as "Private" in the obituary to make sure the capacity is not exceeded within the church? yes no

Is a public visitation allowed prior to the service at the church? yes no

If so, what is the maximum amount of people allowed inside at one time? _____

Are there special considerations that need to be observed in seating at the church?

Family: _____

Pallbearers: _____

Special Groups: _____

Will the church post signage for one way enter and exit? yes no

Will the church provide: Hand Sanitizer? ____ Masks? ____ Facial Tissue? ____

Will an extra honorarium be required for the custodian/cleaning? yes no

If yes, what is the stipend amount? \$_____

Who does the check get made out to? _____

Does the church permit flowers in the church? yes no

If yes, what guidelines should be

observed? _____

Does the church permit video recording and/or streaming in the church? yes no

If yes, is there WIFI available? yes no

Does the church provide video recording and/or streaming for the family? yes no

Will communion be served at the church? yes no

If yes, what guidelines should be observed

Are there any changes to the collection or distribution of Mass cards? yes no

If yes, what guidelines should be observed? _____



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Will Congregational Hymns be allowed to be sung? yes no

If there is any recorded music to be played, who will provide the music and be responsible for playing it?

Will there be an Organist? yes no

If yes, what is the stipend amount: _____ Check made out to: _____

Will the pall be placed on the casket/urn? yes no

If yes, who will be allowed to place it? _____

Will food or beverage be allowed? yes no

Will the church group provide a luncheon for the family? yes no

If yes, what guidelines does the family need to know about for the luncheon?

Other vital information for the service at the church:

Committal Service:

Do you require masks to be worn at the committal service? yes no

Do you want to ride with the funeral director in the funeral home vehicle or drive your own vehicle to the cemetery? ___Funeral Director ___Own Vehicle

Will you conduct services within committal chapels? yes no

Will any congregational hymns be allowed to be sung? yes no

If there is any recorded music to be played, who will provide the music and be responsible for playing it?

Do you prefer attendees to gather closely to hear or allow social distancing of 6 feet or more among groups of people? ___Gather Closely ___Social Distance

Do you permit video recording and/or streaming at the graveside service? yes no

Other vital information for the committal service: _____

Other Concerns/Comments by the Officiant: _____

