



Sacred Heart Parish  
1701 Wilder Avenue  
Honolulu, HI 96822  
☎ (808) 973-2211  
📠 (808) 973-2209

St. Pius X Parish  
2821 Lowrey Avenue  
Honolulu, HI 96822  
☎ (808) 988-3308  
📠 (808) 988-9313



[WWW.MP-CC.NET](http://WWW.MP-CC.NET)

## **MISSION STATEMENT ON BEREAVEMENT**

To be the hands, heart and hope of God for families who are dealing with the loss of a loved one. To extend support, assistance, and care in dealing with the preparation of funeral services and arrangements, allowing the family and friends of the deceased to fully celebrate the Beginning of New Life for their loved one.

The parish staff and members of the bereavement team of Sacred Heart Parish/St. Pius X Parish stand beside you in your bereavement and grief, and we support you with prayers, fellowship, and the dignity you expect in planning the liturgical mass or services for your loved one.

## **HOW TO PROCEED**

Please contact the parish office at 973-2211. Office staff will solicit initial contact information from you, such as your name, address and telephone number, as well as the name, address and telephone number of the deceased person. They will also schedule a time for family members to meet with a deacon or a bereavement ministry member who can assist in planning the readings and confirming the date and time for the Funeral Mass or service.

The following points might assist you in preparing for the meeting.

- Is deceased a member of Sacred Heart Parish/St. Pius X Parish? Or of another Catholic parish?
- Had deceased previously selected the prayers, readings, or other texts to be used in the Funeral Mass?
- Do you know the name and telephone number of the funeral director who will be assisting you?

**Deceased**

Name: \_\_\_\_\_

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

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

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Death: \_\_\_/\_\_\_/\_\_\_

Birthdate: \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_\_\_

Religion: \_\_\_\_\_

Practicing: Y/N Anointed: Y/N

Church of Baptism: \_\_\_\_\_

**Family Contact:**

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

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

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_

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**Schedule of Service**

Date of Service: \_\_\_\_\_

Please check: \_\_\_Body w/Casket \_\_\_Ashes w/Urn \_\_\_No Casket or Urn

Arrival: \_\_\_\_\_ to \_\_\_\_\_

Visitation: \_\_\_\_\_ to \_\_\_\_\_

Final Viewing: \_\_\_\_\_ to \_\_\_\_\_

Funeral Mass or Prayer Service:

\_\_\_\_\_ to \_\_\_\_\_

Burial: \_\_\_\_\_ to \_\_\_\_\_

Name of Presiding Priest/Deacon: \_\_\_\_\_

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**Funeral Home/Mortuary Information**

Mortuary/Funeral Home: \_\_\_\_\_

Name of Funeral Director: \_\_\_\_\_

Phone: \_\_\_\_\_

## **The Readings**

(The booklet "Through Death to Life" is available to assist you in preparing to celebrate the funeral mass.)

Eulogy (Done after greeting & intro, 10 minutes max):

\_\_\_\_\_  
\_\_\_\_\_

1<sup>st</sup> Reading: \_\_\_\_\_

(Old Testament)

Lector: \_\_\_\_\_

Responsorial Psalm: \_\_\_\_\_

2<sup>nd</sup> Reading: \_\_\_\_\_

(New Testament)

Lector: \_\_\_\_\_

Gospel by Presider: \_\_\_\_\_

Incense: Y/N

Deacon: \_\_\_\_\_

Altar Server(s): \_\_\_\_\_

Special Minister of the Eucharist: \_\_\_\_\_

Gift Bearers: \_\_\_\_\_

Additional for Service:

Rosary:    yes        no

Vigil:      Date \_\_\_\_\_

              Time \_\_\_\_\_

## **The Music**

Organist: \_\_\_\_\_

Other: \_\_\_\_\_

Cantor: \_\_\_\_\_

(There is a \$100.00 suggested donation for music)

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✚ **Cremation Note:** Given the various cultural customs, in the Diocese of Honolulu, cremation is an acceptable option for Catholics. The church in its current law (Canon 1176.3) states: "The Church earnestly recommends that the pious custom of burying the bodies of the dead be observed; it does not, however, forbid cremation unless it has been chosen for reasons which are contrary to Christian teaching." (i.e. Contrary to Christian belief of the resurrection of the dead).

✚ **Clergy Note:** Record must be dropped and register signed in the Rectory office.

# Refreshments, Hall/Rectory, Parking

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## REFRESHMENTS

Parish will provide:

- Coffee
- Juice
- Pastries (4-6 dozen)
- Tent (If yes, notify handyman)
- Other \_\_\_\_\_

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## HALL/RECTORY COURTYARD

Requesting use of Parish Hall:

- Yes; Date & Time \_\_\_\_\_
- No

Requesting use of Rectory Courtyard:

- Yes; Date & Time \_\_\_\_\_
- No

Approval from Grade School:

- Yes
- No
- Not Applicable

Provide details if facilities requested:

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## PARKING

Parking Control: \_\_\_\_\_

Approximate Number of Persons Attending: \_\_\_\_\_