

# Memory Makers White Dove Releases Funeral Order Form

**Fax To Memory Makers At**

**724-727-9620**

*The Funeral Service Will Take Place On*

(Day) \_\_\_\_\_ (Date) \_\_\_/\_\_\_/\_\_\_

**We Will Notify You When The Faxed Order Is Received**  
**Please Call Us If You Do Not Hear From Us Within 8 Hours**

**Greg: (724) 681-5774 - Nick: (412) 527-7925**

_____ Funeral Home	
Main _____	Fax _____
FH Contact- _____	Location- _____

**PRICE \$250.00\***

Name of Deceased \_\_\_\_\_ Age \_\_\_\_\_

Marital Status of the Deceased  Married (Spouse's Name \_\_\_\_\_)

Widowed  Divorced  Never Married  Child

Are There Surviving Children?  No /  Yes – How Many \_\_\_\_\_

Please Provide Children's First Names \_\_\_\_\_

**\*\*\*\*\*Dove Release Will Take Place At\*\*\*\*\***

Check one:  Cemetery  Funeral Home  Church  Other

Location Name \_\_\_\_\_ ( Grave or  Chapel)

\*Address \_\_\_\_\_

Time Service or Mass Begins \_\_\_\_\_

**If The Release Is At The Cemetery \*\*\*Expected Arrival Time At The Cemetery \_\_\_\_\_ \*\*\***

**Music Request (Optional)**

SONG \_\_\_\_\_ ARTIST \_\_\_\_\_

**(We Will Choose The Music Unless A Specific Song and Artist are Requested)**

**PAYMENT IS DUE THE DAY OF THE RELEASE Make checks payable to "Memory Makers"**

**Please return by fax to 724-727-9620**

