P.O. Box N-6145
Nassau, Bahamas
(242) 603-0028
ebenezermethodistchurch242@gmail.com
www.ebenezermethodist.org

Today's Date: _____
DD / MMM / YYYY

Member: ☐ YES ☐ NO

APPLICATION FOR FUNERAL

DECEASED Information (Please PRINT)

Name: _____

Status upon Death:
☐ Single
☐ Divorced
☐ Widowed
☐ Married

Birth Date: __ __ / __ __ / __ __ __ __ (DD / MM / YYYY)

Passing Date: __ __ / __ __ / __ __ __ __ (DD / MM / YYYY)

Relation to the Deceased:
☐ Mother/Father ☐ Aunt/Uncle
☐ Son/Daughter ☐ Spouse
☐ Sister/Brother
☐ Other: _____

RELATIVE Information (Please PRINT)

Applicant's Name: _____

Address : _____

P.O. Box : _____ Cell: ___-_____ Home: ___-_____ Work: ___-_____

Email : _____

FUNERAL Information *(Please PRINT)*

Organist Requested: _____

Funeral Home Officiating: _____

Funeral Home Contact Person: _____ Cell: ___-_____ Work: ___-_____

Date of Funeral: __ __ / __ __ / __ __ __ __ (DD / MM / YYYY) Expected Time of Funeral: __ __ : __ __ AM PM

Officiating Minister(s): Methodist funerals are to be officiated by a Methodist Minister. Otherwise, special permission must be given.

_____ ☐ Methodist ☐ Other: _____

_____ ☐ Methodist ☐ Other: _____

Funeral Hymns (for Organist):

_____

_____

☐ Livestream Requested

BURIAL Information *(Please PRINT)*

Burial Type: ☐ Casket ☐ Urn

Date of Burial: __ __ / __ __ / __ __ __ __ (DD / MM / YYYY) Time of Burial: __ __ : __ __ AM PM ☐ Map Attached

Location of interment: ☐ Ebenezer Graveyard Row: _____ Plot: _____
☐ Other: _____

Name on Grave being interred: _____

Grave Details: _____

Special Notes: _____

_____

Disclaimer/Signature: I have read the information below and agree to all rules, requirements, stipulations and policies as outlined.

Applicant's Name: _____ Applicant's Signature: _____ Date: _____

Payment: ☐ Cash ☐ Cheque ☐ Direct Deposit **Total Paid: _____ Receipt #:_____**

Office Use Only

☐ Approved Administrator's Signature: _____ Date: _____

☐ Not Approved Minister's Signature: _____ Date: _____

CONFIRMED

☐ Organist _____ ☐ Minister _____ ☐ Sound Tech _____ ☐ Sexton _____

INFORMATION
(FUNERALS)

- **General Information**: Application is hereby made for a Memorial Service/Funeral/Home-Going Service for the individual named on this form to be held at Ebenezer Methodist Church, Shirley Street, Nassau, Bahamas. The minister of Ebenezer Methodist Church will officiate the funeral unless specified otherwise by the applicant. In the event that the person officiating the funeral is different from the minister of Ebenezer Methodist Church, then approval is needed from The Congregational Board of Ebenezer.

- **Date/Time:** The time and date of the funeral must be approved by the Congregational Board and leaders of Ebenezer Methodist Church **before** any plans for the funeral are finalized, or any announcement is made. No funerals are allowed to take place in Ebenezer Methodist Church before 1:00 p.m. on any given Sunday.

- **Fees:** The following fees include the cost of the church, minister, sexton, organist and sound technician:
  Member: ***$425 (funeral)***
  Non-member: ***$1025 (funeral)****
  * *A $500 Gate fee is added for access to the Ebenezer Graveyard for the burial.*

- **Sexton**: The sexton will be available to open the church on the actual day of the funeral **two hours** before the start time of the funeral stated on this application. Any other arrangements may be made with the church sexton through the Church Office.

- **Organist:** An Ebenezer organist is used to play the organ for funerals held at Ebenezer. If there is an non-Ebenezer organist that is to be used for the ceremony, then permission must be obtained from the church in advance. It is the responsibility of the applicant to contact the office or Music Director with information for the organist to let him/her know of any music to be played before, during and after the service, along with any special music to be played at any time during the service. The organist should receive information on hymns, and songs no later than 72 hours before the funeral date specified on this application.

- **Disclaimer:** It is the responsibility of the **family** and the **Funeral Home** to ensure that the remains of the deceased that are interred are placed in the correct grave plot. Ebenezer Methodist Church accepts **NO** responsibility for any remains that are incorrectly interred. The family and/or funeral home will be financially responsible to correct any errors made concerning interment/burial.

- **Liability:** Ebenezer Methodist Church accepts **NO** responsibility for any damage/injury sustained while on Ebenezer premises/ property and the applicant hereby releases the Church from any and **ALL** liability for such damage/injury.