

THE CELEBRANT

CELEBRATION OF LIFE

MEDIA RELEASE FORM

NAME OF CELEBRANT: _____

I, (print name), _____

am authorized to and grant The Celebrant, LLC, it's employees and/or representatives permission to use any photographs, audio, video, quoted remarks, prepared obituary or any other creative produced therein - digital or traditional in any marketing, advertising communications or social media platform. I explicitly grant permission for:

- 1. The creation and publication of a Celebration page on www.thecelebrant.love for the above named celebrant**
- 2. Use and reuse of all creative developed for the celebrant in traditional and digital marketing, brand and advertising efforts**

I also release The Celebrant LLC from all claims, demands and liabilities whatsoever in the use of said materials.

AUTHORIZED SIGNER: _____

RELATIONSHIP TO CELEBRANT: _____

DATE: _____

ADDRESS: _____

TRIBUTE QUESTIONNAIRE

JUST FILL IN ALL APPROPRIATE BLANKS. EMAIL TO MAIL@THECELEBRANT.LOVE. QUESTIONS? CALL OR TEXT (310)737-2262.

FAMILY CONTACT: _____ EMAIL: _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

DESIGN & DIGITAL FLIP TRIBUTES

4-PAGE TRIBUTE \$240 (8 PICTURES/POEMS) **VIDEO TRIBUTE \$240** (35-50 PICTURE/VIDEO)

8-PAGE TRIBUTE \$385 (25 PICTURES/POEMS) **BOOKMARKS - QUANTITY** _____

12-PAGE TRIBUTE \$530 (40 PICTURES/POEMS) **COLOR(S) REQUEST**

PRINT QUANTITY (25 MINIMUM) _____ 1 _____ 2 _____

VIEW PRINT PRICES AT WWW.THECELEBRANT.LOVE

CONTACT NUMBER

DATE NEEDED

NAME OF DECEASED: _____ CAUSE: _____

FUNERAL HOME: _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____

GIVEN NAME: _____ NICKNAME _____

DATE OF BIRTH: _____ BIRTH PLACE _____

TRANSITION DATE _____ PLACE OF TRANSITION _____

VISITATION DATE _____ HOURS _____ FAMILY HOUR _____ PLACE _____

WAKE DATE _____ TIME _____ SERVICE DATE _____ TIME _____ PLACE _____

OFFICIANT _____ CITY _____ STATE _____

CHURCH _____

INTERMENT _____ CITY/STATE _____

PALLBEARERS

HONORARY PALLBEARERS

ORDER OF SERVICE

PROGRAM ITEM	PROGRAM PARTICIPANT	ADDITIONAL INFO
1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____
6	_____	_____
7	_____	_____
8	_____	_____
9	_____	_____
10	_____	_____
11	_____	_____
12	_____	_____
13	_____	_____
14	_____	_____
15	_____	_____

The Celebration
 August 20, 2020 - Angelus Funeral Home
 Rev. James McKnight - Officiant

Processional
Scripture & Prayer
 Rev. James McKnight
Musical Selection
 I'll Always Love My Momma
Acknowledgments & Condolences
 Mary Tate
Obituary
 Mrs. Adore Parker
Remarks
 Two Minutes Please
Poems
 Grand Children
Musical Selection
 Going Up Yonder
Eulogy
 Rev. James McKnight
Recessional
Interment
 Inglewood Park Cemetery
Repast
 The Rose - Compton, CA

NOTES

SCRIPTURES.
SACRED TEXT: (BIBLE, TALMUD, QUR'AN, ETC.)
 LIST ALL VERSIONS, BOOKS, CHAPTERS AND SCRIPTURE NUMBERS (I.E. JOHN 3:16 - KING JAMES VERSION)

1	VERSION	4	VERSION
2	VERSION	5	VERSION
3	VERSION	6	VERSION

- WRITE THANK YOU FOR ME
 CHOOSE THANK YOU POEM FOR ME
 WRITE MY OWN THANK YOU (USE SPACE BELOW)

THANK YOU

REPAST INFORMATION

EDUCATION:

GRAMMAR SCHOOL/CITY _____

HIGH SCHOOL _____ CITY _____ STATE _____

GRAD. YEAR _____ ACTIVITIES _____

TRADE/TECHNICAL SCHOOL _____ COURSE OF STUDY _____

UNDERGRADUATE SCHOOL _____ CITY _____ STATE _____

MAJOR/MINOR _____ DEGREE _____ YEAR _____

ACTIVITIES _____

GRADUATE SCHOOL _____ CITY _____ STATE _____

MAJOR _____ DEGREE _____ YEAR _____

POST-GRADUATE STUDIES _____ CITY _____ STATE _____

DEGREE AWARDED _____ YEAR _____

SORORITY/FRATERNITY _____ YEAR CROSSED _____

UNDERGRADUATE CHAPTER _____ UNIVERSITY _____

GRADUATE CHAPTER _____ CITY/STATE _____

MILITARY SERVICE

BRANCH _____ YEARS OF SERVICE _____ RANK _____

CONFLICTS/WARS _____

PROFESSIONAL CAREER

WORKPLACE I _____ CITY _____

POSITION(S) _____

WORKPLACE II _____ CITY _____

POSITION(S) _____

WORKPLACE III _____ CITY _____

POSITION(S) _____

WORKPLACE IV _____ CITY _____

POSITION(S) _____

WORKPLACE V _____ CITY _____

POSITION(S) _____

PROFESSIONAL ACHIEVEMENTS

PROFESSIONAL ASSOCIATIONS

HONORS & AWARDS

CURRENT CHURCH MEMBERSHIP

NAME _____ LOCATION _____

RELIGION _____ PASTOR _____ YEARS MEMBER _____

ACTIVITIES _____

PREVIOUS CHURCH MEMBERSHIPS

NAME _____ LOCATION _____

NAME _____ LOCATION _____

CLUBS & AFFILIATIONS

INTEREST

FAMOUS QUOTE

Please give us a quote from your loved one that he/she was known for saying all the time. For example, "A bird in the hand beats two in the bush."

PLEASE TELL US ABOUT YOUR LOVED ONE. What kind of personality did they have? What were their greatest loves? For what were they known? How will they be missed? How will they be remembered? What were their special talents? How did they spend their time? What constituted a good time for them? Please include any other appropriate information you would like included.

WHAT DO YOU OR OTHERS HAVE TO SAY ABOUT YOUR LOVED ONE? THESE MAY BE USED AS QUOTES IN THE PROGRAM. PLEASE BE BRIEF.

FULL NAME _____ RELATIONSHIP _____

FULL NAME _____ RELATIONSHIP _____

FULL NAME _____ RELATIONSHIP _____

FULL NAME _____ RELATIONSHIP _____

FULL NAME _____ RELATIONSHIP _____

SPECIAL INSTRUCTIONS