

Memorial Service Name Form

Kindly submit the name of the individual to be honored during the memorial service. Fill out ONE of the categories listed below. Please PRINT all information.

1. _____ Rainbow or Majority Girl (please circle one) from
_____ Assembly No. _____. The person who will walk in the
Memorial for her is _____.

2. _____ Grand Helper from District _____. The person who will walk
for him/ her in the Memorial is _____.

3. _____ Mother Advisor, Rainbow Advisory Board Member, Mason,
Eastern Star or other worker for Rainbow (please circle one) from _____
Assembly No. _____.
Assembly Name and No. _____
Lodge Name _____
Eastern Star Chapter Name _____

4. _____ Family of Rainbow Girl (please circle one) from
_____ Assembly No. _____. This can be a parent, grandparent, or
other immediate family member. Give the name of the Rainbow Girl and how she is related to the
deceased. _____ is the girl from _____
Assembly No. _____. The deceased was her _____.

Who can be contacted if additional information is needed?

Name _____

Phone number or Room Number at Grand Assembly _____