



DIOCESE *of* GAYLORD

PLANNING SHEET FOR EPISCOPAL LITURGIES

OFFICE OF WORSHIP AND LITURGY

Please complete this form and return it to the Office of Worship and Liturgy no later than two weeks before the date of the event to best prepare the bishop for his visit to your community.

<i>Location:</i>	<i>City:</i>
<i>Date:</i>	<i>Time:</i>
<i>Contact Name:</i>	<i>Phone:</i>
<i>Email:</i>	
<i>Musician Name:</i>	<i>Phone:</i>
<i>Email:</i>	

1. What is the occasion for the bishop's visit (*e.g.* parish anniversary, school graduation, festival)?
2. What liturgy is to be celebrated (*e.g.* 13th Sunday in Ordinary Time, Order for the Blessing of a Chapel, Mass for the Conferral of Confirmation)?
3. Liturgical color: ☐ *White* ☐ *Green* ☐ *Red* ☐ *Violet*
4. The bishop would like to use a parish vestment, if available.
☐ *We will provide a vestment for the bishop.* ☐ *We ask that the bishop bring his own vestment.*
5. Is there anything else happening during/after the liturgy that will require a special blessing or commissioning by the bishop?

6. Are there any individuals or groups that should receive recognition from the bishop? If yes, please list the names of those to be recognized and the reason for being recognized.

7. Expected concelebrant(s): _____

8. Assisting deacon(s): _____

9. Will you have a reserved parking space for the bishop? If yes, where is it located?

10. Please provide any additional information that will help the bishop prepare for his visit:

CHOICE OF MASS PARTS

Reading I: (*Lectionary* #_____) _____
Resp. Psalm: (*Lectionary* #_____) _____
Reading II: (*Lectionary* #_____) _____
Gospel: (*Lectionary* #_____) _____
Intercessions prepared by: _____
Processional Hymn/Antiphon: _____
Offertory Hymn: _____
Communion Hymn/Antiphon: _____
Recessional Hymn: _____

For questions and to return this completed form, please contact Amelia Martin in the Office of Worship and Liturgy at (989) 705-3503 or email amartin@dioceseofgaylord.org.