

PLANNING FOR A VISITATION

*****Please Return Two Weeks before the Visitation Date*****

If you have questions or concerns, please don't hesitate to contact Barbara Martin 207.772.1953 x 125 or bmartin@episcopalmaine.org. The complete *Customary for Visitations*, including an electronic version of this worksheet, are available at www.episcopalmaine.org. If you need more space, or have additional information to share with Bishop Steve, please feel free to attach additional pages.

Name of Congregation _____

Physical Address (for GPS) _____

Church Phone Number _____

Date of Visitation _____ Time of Service _____

Name of Rector _____ Phone # _____

Name of Deacon* _____ Phone # _____

*if your congregation does not have an assigned deacon, please consider inviting one to participate in the service. You may choose to invite someone who already has a relationship with the congregation, or someone you'd like to meet. If you would like suggestions, please be in touch with Barb.

Name of Chaplain _____ Phone # _____

Name/Phone number of a contact person for the Bishop's use (in the event of an emergency, need for directions, etc.)

If your congregation is more than 2 hours away from Portland, please give us your recommendation for a clean, comfortable place to stay

Worship

Color (check one)

- White: for Baptism
- Red: if a major Sunday feast (ex: Palm Sunday or Pentecost)
- Seasonal
- Festal: for special occasions and celebrations

Readings (Revised Common Lectionary)

First Reading _____

Psalm _____

Second Reading _____

Gospel _____

Order of Service (check one)

- Renewal of Baptismal Vows
- Baptism
- Confirmation/Reception/Reaffirmation

Holy Eucharist (check one)

- Enriching our Worship
- Other (in consultation with the Bishop)

Lord's Prayer

- Contemporary

Final Blessing

- Episcopal Blessing BCP, p. 523

Will there be participation of Lay Ministers as lectors, intercessor and chalice bearers?

In addition to the service, are there any other special functions planned? For example: blessing of acolytes, prayer shawls or signs? Dedication of new space? Anniversary celebration? or something else? Please list. Are there any special requests? (*please let Barbara know in advance*)

Ministry Conversation

What's new in your congregation? Where is the congregation's energy? Around what topics has your most recent conversation revolved?

What else would you like the Bishop to know as he prepares for this celebration? joys? concerns? anything at all.

Please list the members of your church leadership and their position:

Visitation Checklist

Please feel free to arrange the day's schedule of events as best suits your needs, and add additional information about the logistics of the visit as necessary.

Before the Visitation

_____ Visitation Worksheet due to Bishop's Office *(2 weeks before visit)*

_____ Draft Order of Worship due to Bishop's Office *(1 week before visit)*

_____ Date and Time of pre-visit phone chat with Bishop Steve

_____ Date, time and location of vestry meeting

Timeline for the Day of the Visitation

_____ Arrival time

_____ Meet with Chaplain, Confirmands and Sponsors

_____ Service

_____ Reception

_____ Vestry Meeting

_____ Time with Clergy, Spouse/Partner, Family

_____ Departure

_____ Other *please describe*

Pastoral and Practical

_____ Time with Clergy, Spouse/Partner, Family *if not the same day as the visitation*

After the Visitation

_____ BDF Donation

_____ Updates to "Official Acts" (pg 6-7 of this worksheet)

INFORMATION FOR OFFICIAL ACTS AND PREPARATION OF CERTIFICATES

Thank you for PRINTING clearly.

Full Name of Clergy Presenter _____

Baptism

Full Name, Date of Birth, Location of Birth, Name(s) of Parents,

Name(s) of Sponsors (if available)

Ex: Jane Plane Doe, 01/01/01, Swithins, Maine, Mary and Joe Smith, Paul and Peter Stone

Confirmation

Full Name and Age, name of clergy sponsor (if different), name(s) of sponsor(s)

Ex: Jane Plane Doe, 47, Rev. Adam E. Garden, Eve Garden

Reception

Full Name, Age, Denomination of Baptism, Prior Religious Affiliation

Ex: Jane Plane Doe, 47, Roman Catholic, Lutheran

Reaffirmation

Full Name, Age, Previous Congregation (if any)

Ex: Jane Plane Doe, 47, St. Swithin's by the Sea

Please record any **Blessings, Dedications, or Special Actions** in the space below: