

\_\_\_\_\_  
Name of Congregation

**Bishop's Visitation Worksheet**

\_\_\_\_\_  
Date

<b>Clergy/Leadership Information</b>				
Date of Visitation			Liturgical Day	
Church				
Address				
Clergy Name			Cell Phone	
Clergy Name			Cell Phone	
Clergy Name			Cell Phone	
Sr. Warden			Cell Phone	

<b>Service Information</b>				
Morning Service Times	Rite I or Rite II	Eucharistic Prayer (BCP designatino or specify other)	Is the Eucharistic Prayer said or sung?	Notes

<b>Schedule of the Day</b>	
Time	Event
	Arrive (at least 15 mins. Prior to first event)
	Service/s (non-Confirmation; if applicable)
	Meet with Candidates
	Service
	Reception/Coffee Hour
	Other (e.g., Class, special event)

<b>Baptims</b>		
Infant:	Youth:	Adult:
<b>Other Candidates</b>		
Confirmations:	Receptions:	Reaffirmations:

<b>Lessons of the Day</b>	
<i>(Please complete if other than RCL, or if more than one option for the Bishop to choose from)</i>	
Old Testament:	Psalm:
New Testament:	Gospel:

\*If parish staff has filled out the first page, please save and forward to a clergyperson now.