

SCHEMA FOR LITURGY PLANNING

SHEET 1
(PLEASE TYPE)

GENERAL INFORMATION

OCCASION	DATE	TIME
FULL PHYSICAL ADDRESS:	CONTACT PERSON, CELL PHONE NUMBER	

(RETURN THIS PAGE FOR ALL CELEBRATIONS)

PARISH _____

A. Will the Bishop be the Principal Celebrant -- or will he preside at the Mass?
PRINCIPAL CELEBRANT _____ PRESIDE (simply be present) AT THE MASS _____

B. HOMILY

Will the Bishop be the homilist at this liturgy? Yes _____ No _____ If yes -- please provide us with the following information:
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SCRIPTURE CITATIONS

Reading 1	Reading 2	Gospel
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C. OUR FATHER

Will the OUR FATHER be sung? YES _____ NO _____
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D. ADDITIONAL INFORMATION

1. Is there anything regarding this occasion about which the Bishop should be apprised (e.g. historical significance, special groups present, etc.)? Please indicate.

2. Would you like the Bishop to give particular attention to some point in the homily (e.g. the generosity of the people for a charitable cause)? If so, please explain. (Use additional sheets if necessary).

3. If this ceremony is a Confirmation, please complete page 3.
4. Please indicate the color of the vestments: _____

SCHEMA FOR LITURGY PLANNING
SUPPLEMENTARY INFORMATION FOR PARISH LITURGICAL CELEBRATIONS
SHEET 2
(PLEASE PRINT OR TYPE)

GENERAL INFORMATION

OCCASION	DATE	TIME
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1. ENVIRONMENT

Will incense be used? Yes____ No____

2. PROGRAM -[IF ONE IS TO BE HANDED OUT TO ATTENDEES]

Please submit proposed TEXT for the program along with this SCHEMA. It should include:

- Order of Ceremony which follow Liturgical guidelines;
- any special readings or rites appropriate to the event;
- any hymns or music selections to be used during the event;
- and acknowledgments and copyright information.

3. SPECIAL NEEDS

Please submit proposed TEXT for:

The Prayers of the Faithful and any other special Presentations or blessing that are to be included in the liturgy, and who developed them. _____

- Special Presentations _____
- Recommitment Text _____
- Other _____

PRINCIPAL CONCELEBRANTS

DEACON(S)

**IF THIS SCHEMA IS FOR A CONFIRMATION
PLEASE COMPLETE THIS PAGE ALSO. THANKS.**

Name of Parish _____
(please print)

Date of Confirmation _____
(Month) (Day) (Time)

Approximate # of Candidates _____ Approximate Age _____

Location of meeting with Bishop and candidates _____
** Please remember that the meeting with the Bishop and candidates is an opportunity for the Confirmandi to ask the Bishop questions.*

Location of Rehearsal (Date & Time) _____

Location of Reception _____
** The Bishop will be available after Mass for informal photographs with each family.*

Group Picture? _____ *Yes _____ No (Photo coordinator _____)
**If Yes, will the picture be taken, before Mass _____? OR After Mass _____?*

Signature _____

Date _____