Episcopal Visitation Notification

Church Name: ____________________________________________________________

City: __________________________________________ State: _______ Zip Code: ____________

Name of Bishop Visiting: __________________________ Date of Visitation: ______________________

Clergy Name: ___________________________________ Cell phone number: ______________________

Sr. Wardens Name: _____________________________ Cell phone number: ______________________

This form is for the Rector / Vicar of the congregation to complete and return to the Office of the Bishop at least two weeks prior to the Bishop’s Visitation. Please contact Elizabeth ekozin@episcopalswfl.org in the Bishop's Office with any questions. The Bishop is looking forward to spending this time with you and your congregation.

1. What are the time(s) of the service(s) ____________________________

2. What Lessons are being used ___________________________ Music __________________________

3. What are the vestments and color for the day: ____________________________

4. Will there be Confirmations/Receptions/Reaffirmations: YES ______ NO ______

   4a. If yes, how many (we will send you by mail certificates to be completed for each individual. The Bishop will sign these when he arrives.)

   Confirmations _________ Receptions _________ Reaffirmations _________

5. Will there be Baptisms: YES ______ NO ________ If yes, how many __________

6. Would you like us to provide envelopes for the Bishop’s Discretionary collection? YES ______ if Yes how many ______ NO ______

7. Will the Bishop be meeting with members of the Vestry? YES ______ NO ______

   7a. If yes, what is the time frame and nature of this meeting ____________________________

8. What other activities are planned for the visitation: (i.e. meeting with Adult forum, lunch, visiting Sunday School classes, meeting with Sr. and/or Jr. Wardens etc.) ____________________________

9. Are there any special concerns specific to your congregation for the Bishop's attention: ____________________________

10. Are there any specific parking instructions for the Bishop: ____________________________

11. A copy of the Bulletin for the Visitation should be faxed 941.556.0321 or scanned by electronic copy to Elizabeth, in the Office of the Bishop, ekozin@episcopalswfl.org no later than the Tuesday prior to the Bishop’s visit with you.

Any additional questions, comments or concerns? ____________________________


Revised 07/2019