Diocese of East Carolina

EUCARISTIC VISITOR

Application for License

To the Bishop of East Carolina

I recommend and request that ______________________________, an adult, confirmed, communicant in good standing, be licensed as a Eucharistic Visitor, whose functions shall be taking the Sacrament consecrated at the celebration to those unable to participate directly following a celebration of the Holy Eucharist on Sunday or other principal celebrations.

I do certify this person is qualified and trained in accordance with the Canons and the Diocesan Guidelines. I will provide continuing supervision and training.

I understand that this is a License for a period of one year, and must be renewed on Easter Monday each year.

_________________________________
Signature of Member of Clergy

_________________________________
Church and City

I agree to conform to the Canons, the Diocesan Guidelines, and the direction of the Bishop and the Member of the Clergy in charge of the congregation where I am to serve, in the exercise of the ministry of a Eucharistic Visitor.

I understand that this is a License for a period of one year, and must be renewed on Easter Monday each year.

_________________________________
Signature of Lay Person for whom this License is requested

___________________________, 20_____
Date of Application

Send to:
Bishop of the Diocese of East Carolina
P.O. Box 1336
Kinston, NC 28503
Fax: 252-523-5272