

SCHEMA FOR LITURGY PLANNING

Most Reverend Bernard E. Shlesinger III

**Please send completed copies to: bishop’s Executive assistant**

**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:

**Scripture CitationS: \*Masses on Saturday evenings and Sunday are all to use Sunday readings**

|  |  |  |
| --- | --- | --- |
| Reading 1 | Reading 2 | Gospel |

**C. Our Father**

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| --- |
| Will the **OUR FATHER** be sung? **YES \_\_\_\_\_\_\_\_\_ NO \_\_\_\_\_\_\_\_\_** |

**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.

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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).

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3. If this ceremony is a Confirmation, please indicate number to be confirmed: \_\_\_\_\_\_\_\_\_\_\_\_\_

Please give the average age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Please indicate the color of the vestments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Will this celebration be livestreamed or recorded? If so, are there extra items the videographer needs to be aware of? (Ex: extra processions, extra readers, etc).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Supplementary Information for parish Liturgical Celebrations**

**General Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Occasion | Date | | Time |
|  | | Phone Number | |

**1. Ministries**

(Identify all ministers on reverse of this page)

**2. Seating**

(Concelebrants, Families, Honorees)

Person Responsible: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. **Environment**

(Flowers, Candles, Oils, Soap, Warm Water, Wine, Eucharistic Bread, Vessels, incense)

Person Responsible: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will incense be used? Yes\_\_\_\_ No\_\_\_\_

**4. Program -[If one is to be handed out to attendees]**

**Please submit proposed TEXT for the program along with this SCHEMA.**

**It should include:**

1. Order of Ceremony which follow Liturgical guidelines;
2. any special readings or rites appropriate to the event;
3. If Music is to be printed in program provide art for program production (jpg, pdf, tif files, etc.)
4. and acknowledgments and copyright information.

**5. 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. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Special Presentations \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Recommitment Text \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**6. Rehearsals**

Music (site, schedule): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Liturgy (site, schedule): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Principal Concelebrants**

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|  |  |  |

**Deacon(s)**

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| --- | --- | --- |
|  |  |  |
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**Honorees**

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  |  |  |

**Lectors**

|  |  |  |
| --- | --- | --- |
|  |  |  |

**Music Coordinator**

|  |  |
| --- | --- |
|  |  |

**GIFT BEARERS**

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| --- |
|  |

**Altar Server Coordinator**

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**Eucharistic Minister Coordinator**

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| --- |
|  |

**Hospitality Coordinator**

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|  |

If this Schema is for a Confirmation please fill out the following.

Name of Parish \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(please print)

Date of Confirmation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Month) (Day) (Time)

Approximate # of Candidates \_\_\_\_\_\_\_\_\_\_ Approximate Age \_\_\_\_\_\_\_\_\_\_

Dinner \_\_\_\_ Time \_\_\_\_\_\_\_\_ Reception \_\_\_\_ Time \_\_\_\_\_\_\_\_

Dinner location if different from Church:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_