



## DIocese OF SOUTH CAROLINA VISITATION CUSTOMARY 2018

1. DEADLINE: COMPLETE AND RETURN THE VISITATION QUESTIONNAIRE 4-6 WEEKS IN ADVANCE OF THE VISITATION. THIS ENABLES THE BISHOP TO PROPERLY PLAN AND PREPARE.
2. OVERNIGHT ACCOMODATIONS: IF THAT REQUIRES OVERNIGHT ACCOMMODATIONS, THE PARISH IS ASKED TO MAKE THOSE ARRANGEMENTS ON THE BISHOP'S BEHALF.
3. PROTOCOL: APPROPRIATE LITURGICAL COLORS FOR THE OCCASION ARE EITHER THE COLOR OF THE SEASON (ESPECIALLY DURING LENT, ADVENT, EASTER, OR THE WHITE OF BAPTISM, RED FOR CONFIRMATION IS ALSO PERMISSIBLE). PLEASE INDICATE YOUR CHOICE AND ANY VESTMENT PREFERENCE ON THE QUESTIONNAIRE. IF THERE IS A DEACON ASSIGNED TO THE PARISH HE OR SHE SHOULD ASSIST AS BISHOP'S CHAPLAIN. WHEN NOT PRESENT ANOTHER PERSON MAY BE ASSIGNED FOR THIS ROLE (WHERE NEEDED THE BISHOP WILL INSTRUCT THIS PERSON ON HIS OR HER ROLE AND RESPONSIBILITIES).
4. BISHOP'S DISCRETIONARY FUND: IT IS CUSTOMARY THAT THE OPEN PLATE OFFERING (OR SOME ALTERNATIVE AMOUNT PREVIOUSLY DETERMINED BY THE VESTRY) BE DESIGNATED FOR THE BISHOP'S DISCRETIONARY FUND. THOSE FUNDS SHOULD BE CONVEYED AFTER THE VISITATION AND AT THE CONVENIENCE OF THE PARISH TREASURER.
5. COMPLETE THE ENTIRE FORM: WHERE MULTIPLE SERVICES ARE PLANNED DURING A VISIT, PLEASE INDICATE THE TIME AND NATURE OF EACH SERVICE (I.E. HOLY EUCHARIST, RITE I OR II, CONFIRMATION, ETC...) ON THE QUESTIONNAIRE. THE BISHOP WILL NORMALLY PREACH AT ALL SERVICES AND CELEBRATE WHERE APPROPRIATE.
6. **CONFIRMATION, NOT BAPTISM**: A REMINDER TO CLERGY-AS STATED AT THE CLERGY RENEWAL OF VOWS SERVICE 2014—IT IS THE BISHOP'S PREFERENCE FOR HIS ANNUAL VISITATION TO HAVE ONLY THE LITURGY FOR CONFIRMATION—BAPTISMS CAN BE SCHEDULED AT THE CONVENIENCE OF THE PARISH CLERGY AT ALTERNATE DATE, NOT REQUIRING THE BISHOP TO BE PRESENT
7. CONFIRMATION FORM (PAGE 3): ALSO TO BE RETURNED AFTER THE VISITATION IS THE ATTACHED FORM INDICATING WHO HAS BEEN PRESENTED FOR CONFIRMATION, RECEPTION AND REAFFIRMATION. ESTIMATES OF THE NUMBER ANTICIPATED SHOULD BE REPORTED AHEAD OF TIME ON THE QUESTIONNAIRE.
8. OTHER QUESTIONS: ANY QUESTIONS REGARDING THE BISHOP'S SCHEDULE AND THE CUSTOMARIES OF AN EPISCOPAL VISIT SHOULD BE DIRECTED TO MRS. BETH SNYDER AT THE DIOCESAN HOUSE (843-722-4075).

# VISITATION QUESTIONNAIRE

(Please return to the Bishop's Office **4-6 weeks in advance**)

## General Information

Church Name: \_\_\_\_\_ Priest's Cell Phone: \_\_\_\_\_

Date of Visitation: \_\_\_\_\_

## Saturday Information

- Hotel Accommodations made at: \_\_\_\_\_
- Telephone Number of Hotel: \_\_\_\_\_
- Restaurant (Saturday evening) where appropriate: \_\_\_\_\_
- Time: \_\_\_\_\_

## Sunday Information

### Times of Services:

First Service:	Time _____	Rite _____
Second Service:	Time _____	Rite _____
Third Service:	Time _____	Rite _____
Sunday School:	Time _____	
Other _____:	Time _____	

### Approximate number for:

Confirmation \_\_\_\_\_ Reception \_\_\_\_\_  
Reaffirmation \_\_\_\_\_

Vestments Desired (Rochet & Chimere; Cope & Mitre; etc): \_\_\_\_\_

Color: (choices: color of the season or red) \_\_\_\_\_

Deacon or Person assigned as Bishop's Chaplain : \_\_\_\_\_ ( see #3 on prior page)

### Propers (circle) ACNA or BCP or RCL:

Old Testament \_\_\_\_\_ Psalm \_\_\_\_\_  
Epistle \_\_\_\_\_ Gospel \_\_\_\_\_

**A change for the Propers of the Day requires permission!**

### Other events:

\_\_\_\_\_ **Yes**, I would like for the Bishop to speak to our Confirmands  
**Time:** \_\_\_\_\_

\_\_\_\_\_ **Yes**, I would like for the Bishop to speak to our Adult Sunday School  
**Time:** \_\_\_\_\_ **Topic:** \_\_\_\_\_

\_\_\_\_\_ **Yes**, we plan to have a **Reception** following the last service

### Additional notes for the Bishop:

\_\_\_\_\_

# LIST OF PERSONS CONFIRMED

Please return this form to the Bishop's Office the week after your Annual Visitation with the Bishop:

Mrs. Beth Snyder  
Assistant to the Bishop  
Diocese of South Carolina  
P.O. Box 20127  
Charleston, SC 29413-0127

Date \_\_\_\_\_

Presented by the Reverend \_\_\_\_\_

By Bishop Mark Joseph Lawrence,

In \_\_\_\_\_ Church, \_\_\_\_\_, SC

Please list in alphabetical order. Give full Christian name, Place Mrs. in front of names of married women.

## **For Confirmation**

**Last Name**

**Christian Name**

**Age**

**for Reception**

**Previous Denomination**

**for Reaffirmation**