



LITURGICAL PLANNING FORM FOR THE CELEBRATION OF HOLY MASS WITH THE BISHOP

Return this form two weeks in advance of the Mass to the Office of Sacred Liturgy by mail or e-mail to [fatherward@bhmdiocese.org](mailto:fatherward@bhmdiocese.org) and [sacredliturgy@bhmdiocese.org](mailto:sacredliturgy@bhmdiocese.org).

*Once the Liturgical Planning Form has been reviewed, it will be sent back with a final confirmation to the parish office. Please indicate to whom the confirmation should be emailed:*

Name & Email: \_\_\_\_\_

TODAY'S DATE (date of submission): \_\_\_\_\_

**General Information**

Parish/Place & Occasion				Liturgical Color:	
Mass Date & Time:		Number of Concelebrants:		Number of Deacons	
Name of Concelebrant(s):					
Name of Deacon(s):					
Names of Altar Servers:					

**Prelude and Introductory Rites**

Prelude:	<i>Enter Title/Composer</i>				
Entrance Chant:	<i>Enter Title/Composer</i>				
Penitential Act:	<input type="checkbox"/> I Confess (Bishop) <input type="checkbox"/> Have mercy on us, O Lord <input type="checkbox"/> Invocations (Deacon) <input type="checkbox"/> Sprinkling Rite (Sundays only)			Indicate if these will be sung/recited: Kyrie <input type="checkbox"/> Sung <i>or</i> <input type="checkbox"/> Recited Invocations: <input type="checkbox"/> Sung <i>or</i> <input type="checkbox"/> Recited	
The Gloria	Indicate if it will be sung/recited: <input type="checkbox"/> Sung <input type="checkbox"/> Recited <input type="checkbox"/> N/A				
Collect:	<i>Enter Reading Citation</i>			<i>Enter Page Number</i>	

**Liturgy of the Word**

First Reading:	Scripture Citation & Lectionary Number:
Responsorial Psalm:	Scripture Citation & Lectionary Number:
Second Reading:	Scripture Citation & Lectionary Number:
Gospel Verse:	Scripture Citation:
Gospel:	Scripture Citation & Lectionary Number:

<b>Homily:</b>	<input type="checkbox"/> Bishop <input type="checkbox"/> Other, <i>Homilist Name:</i>
<b>Creed:</b>	Indicate if it will be <input type="checkbox"/> Sung <i>or</i> <input type="checkbox"/> Recited
<b>Prayer of the Faithful:</b>	Indicate if it will be <input type="checkbox"/> Sung <i>or</i> <input type="checkbox"/> Recited

### Liturgy of the Eucharist

<b>Offertory Chant/Music:</b>	
<b>Prayer over Offering:</b>	<b>Missal Page Number:</b>
<b>Sanctus, Mystery of Faith, Amen, and Agnus Dei are sung</b>	<i>Indicate Setting</i>
<b>The Lord Prayer: Indicate if it will be</b> <input type="checkbox"/> Sung <i>or</i> <input type="checkbox"/> Recited	
<b>Communion Chants:</b> <i>Enter Antiphon/Title</i>	
<i>Enter Additional Music</i>	
<i>Enter Additional Music</i>	
<i>Enter Additional Music</i>	
<b>Optional Hymn of Praise:</b> <i>Enter Music</i>	
<b>Prayer after Communion:</b> <i>Enter Citation</i>	

### The Concluding Rites

<b>Recessional Hymn/Instrumental Music:</b>	<i>Enter Title/Composer</i>
<b>Postlude:</b>	<i>Enter Title/Composer</i>

### Other Additional Information

<b>Will there be remarks by the Pastor? (Generally done after the Prayer of Communion.)</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Where will the Bishop greet the congregation after Mass?</b>	<i>Indicate Location</i>
<b>Will any part of the celebration be in another language other than English?</b>	<i>Indicate Language(s)</i>
<b>The Bishop normally uses incense on Sundays, indicate if you request incense to be used:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Indicate if there is a meal and/or a reception, and time of the event:</b>	<b>MEAL:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>TIME:</b> _____ <b>RECEPTION:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>TIME:</b> _____
<b>Indicate special parking instructions:</b>	
<b>Do you have any other comments?</b>	

Signature of Pastor: \_\_\_\_\_