

# Liturgy Planning Sheet

Please complete this form in its entirety and return to the Liturgy Office *at least one week* prior to the ceremony:

**Mail to:** Liturgy Office  
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Parish/Institution: \_\_\_\_\_

Occasion: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

## Ordo Information

Liturgical Calendar Day: \_\_\_\_\_

Green  White  Red  Violet  Rose

## Procession

# of Altar Servers: \_\_\_\_\_

Deacon(s) \_\_\_\_\_

Concelebrant(s): \_\_\_\_\_

\_\_\_\_\_

Main Celebrant:  Bishop Folda  \_\_\_\_\_

## Introductory Rites

Ent. Chant/Hymn: \_\_\_\_\_

Incense Altar

Penitential  Sprinkling Rite

Rite:  Form A  Form B  Form C

Gloria:  NA  Sung  Recited

Intoned by  Cantor  Presider

## Liturgy of the Word

Readings of the Day  Other

Lect:  Sunday  Weekly  Ritual/Votive/Com.

First: \_\_\_\_\_ Lect. #: \_\_\_\_\_

Psalm: \_\_\_\_\_

Second: \_\_\_\_\_ Lect. #: \_\_\_\_\_

Readers: \_\_\_\_\_

Gospel: \_\_\_\_\_ Lect. #: \_\_\_\_\_

Proclaimed by:  Deacon  Priest

Incense

Homilist: \_\_\_\_\_

General Intercessions (please attach a copy):

Deacon (proper to his role)

No deacon: \_\_\_\_\_

## Liturgy of the Eucharist

Off Chant/Hymn: \_\_\_\_\_

Incense

Requested Eucharistic Prayer:

I  II  III  IV  Other: \_\_\_\_\_

Sanctus:  Sung  Recited

Mem. Acclamation:  Sung  Recited

Doxology/Amen:  Sung  Recited

Mass Setting(s): \_\_\_\_\_

## Communion Rite

Our Father:  Sung  Recited

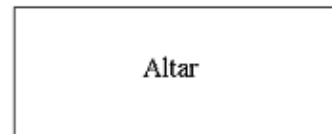
Lamb of God:  Sung  Recited

Communion under both species

# of Ciborium \_\_\_\_\_ # of Chalices \_\_\_\_\_

*Below, mark the following positions for the distribution of Holy Communion:*

Main Celebrant – **M**; Ciborium – **X**; Chalices – **O**



\_\_\_\_\_ Pews \_\_\_\_\_

Comm Chant/Hymn: \_\_\_\_\_

Prayer After Communion

Any presentation for celebrant to make: \_\_\_\_\_

\_\_\_\_\_

Closing Hymn: \_\_\_\_\_