



Episcopal Diocese

— OF CENTRAL FLORIDA —

The Right Reverend Dr. Justin S. Holcomb, Bishop

Application for license as a **EUCCHARISTIC VISITOR** in the Diocese of Central Florida

"A Eucharistic Visitor is a lay person authorized to take the Consecrated Elements in a timely manner following a Celebration of Holy Eucharist to members of the congregation who, by reason of illness or infirmity, were unable to be present at the Celebration. A Eucharistic Visitor should normally act under the direction of a Deacon, if any, or otherwise, the Member of the Clergy or other leader exercising oversight of the congregation or other community of faith." (Title III. 4. 7)

Eucharistic Visitors must be confirmed communicants in good standing. As is the case for Bishops, Priests and Deacons, it is expected that licensed Eucharistic Visitors shall do their best to pattern their lives in accordance with the teachings of Christ, striving in all things to be wholesome examples to the people of God. Thus it is not appropriate to recommend for licensing anyone whose lifestyle is an affront to the gospel, for instance, anyone known to be perpetrating fraud, a malicious gossip, or someone known to be engaging in sexual relations outside of holy matrimony.

I hereby apply to the Bishop of Central Florida for licensing as a Eucharistic Visitor. I am a confirmed communicant in good standing in the Episcopal Church. I subscribe to the *Guidelines for Eucharistic Ministers and Visitors* in the Diocese of Central Florida, and I commit myself to living by them in the exercise of this ministry.

Signature of Applicant

Date

Printed Name of Applicant

I hereby certify that the person herein applying for licensing as a Lay Eucharistic Visitor in the Diocese of Central Florida has received training in accordance with the *Guidelines for Licensed Lay Ministries*. I further certify that this person is a confirmed communicant in good standing in the Episcopal Church, and a person of exemplary character and commitment to our Lord Jesus Christ, as described in the Guidelines.

Signature of Rector/Vicar

Date

Name of Parish/Mission

City/Town