

**Form for Planning In-Person Indoor Worship (Orange, Yellow Risk Levels)**

*Any plan for indoor worship must be provided in writing to the Bishop's Office at least by noon on the Wednesday prior to the first such service. Email this form to Canon Wright at [awright@dioceseofnewark.org](mailto:awright@dioceseofnewark.org). One form is sufficient for a recurring similar service. The accompanying resource guide should be referenced to make your plan for worship.*

Applicant name and title/role: \_\_\_\_\_ Date: \_\_\_\_\_

Email address: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Congregation Name and Town/City: \_\_\_\_\_

Date for initial indoor service: \_\_\_\_\_ Start time: \_\_\_\_\_ End time: \_\_\_\_\_

How many services are scheduled on one day? \_\_\_\_\_

Service: \_\_\_\_\_

How many can your space safely hold (please check most recent guidelines on maximum number)?

\_\_\_\_\_

Describe method of ensuring attendance below maximum (reservations, etc.): \_\_\_\_\_

\_\_\_\_\_

Describe how you will log contact information for attendees, to allow contact tracing if necessary:

\_\_\_\_\_

\_\_\_\_\_

What steps are you taking to train Ushers and other liturgical ministers? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe your cleaning procedures including who will be doing the cleaning: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is vocal music part of your planned service? \_\_\_\_\_

Describe steps taken to reduce risk from singing \_\_\_\_\_  
\_\_\_\_\_

Who are your designated Medical Responders? \_\_\_\_\_

On a separate page, please provide a drawn layout of the setup you intend for the service, noting location of liturgical ministers and furnishings, the spacing of congregational seating, and entry/exit traffic flow. This can be a photograph of a hand-drawn layout.

We, the undersigned leaders of \_\_\_\_\_

in \_\_\_\_\_, affirm that we have read and understood the Guidelines for In-Person Worship and will strive to follow it in any in-person indoor worship gatherings that our church conducts. In addition, we affirm that we have the requisite hand sanitizer and masks to be supplied to parishioners as needed.

Rector/Vicar/Priest-in-charge: \_\_\_\_\_

*Congregations without regular clergy may contact Canon Clark or Canon Wright, if assistance is needed.*

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

Warden: \_\_\_\_\_ Date: \_\_\_\_\_

Warden: \_\_\_\_\_ Date: \_\_\_\_\_