

*Application to be licensed to, directly following a celebration of the Holy Eucharist on Sunday or other principal celebrations, take the sacrament consecrated at the celebration to members of the congregation who, by reason of illness or infirmity, were unable to be present at the celebration.*



## Home Communion Eucharistic Visitor

### To the office of the Bishop:

I, \_\_\_\_\_, wish to be licensed, or renew my license, as a  
Please print name

Eucharistic Visitor in the Diocese of Colorado, in order to carry out my lay ministry at

\_\_\_\_\_

Church

City

I was baptized at \_\_\_\_\_  
Church & Denomination City, State Year

I was confirmed/received at \_\_\_\_\_  
Church & Denomination City, State Year

I was trained at an EM workshop \_\_\_\_\_  
Church

\_\_\_\_\_

City

Date

\_\_\_\_\_  
Signature of Applicant

As rector / vicar / priest-in-charge, I hereby certify that this applicant is baptized, is a confirmed (or received) adult communicant in good standing, has been appropriately trained per diocesan policy, and is a fit and responsible person to be a eucharistic visitor in this congregation. I hereby recommend him / her to be licensed as a eucharistic visitor.

\_\_\_\_\_  
Rector/Vicar/Priest-in-Charge

Date

*This license will remain in effect for 3 years from date of issuance. To renew, complete another copy of this application and send to the office of the Bishop. 07/07*