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| PUBLIC WORSHIP WITH COMMUNION BY EXTENSION**Application for Permission from the Bishop of Derby****Please return the completed form to the Bishop’s Chaplain****nicky.fenton@bishopofderby.org** |
| **Parish/Benefice** |  |
| **Church(es) where public worship with communion by extension will take place** |  |
| **Outline of the exceptional circumstance(s) to be addressed through Communion by Extension**  |  |
| **Please specify the occasion, or limited period, for which permission is sought (including dates)** |  |
| **Please provide the patterns of worship in the church(es) where communion by extension is being proposed** |  |
| **Please provide the patterns of worship in the benefice/group or team (if appropriate)**  |  |
| **Who is currently offering eucharistic worship within the parish, benefice, group or team?** |  |
| **Does the Archdeacon/Area Dean support this application?****Please provide details. E,g. a supporting email** |  |

The Parish seeks your permission for Public Worship with Communion by Extension as set out above. **A copy of a PCC resolution confirming this application is attached.**

**NB The applicant requesting the permission for communion by extension should be the churchwarden of the church where communion by extension will take place.**

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| **Signed:** |  | **Name:**(Please print) |  |
| **Role:** |  | **Date:** |  |

**Permission Granted on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Date)**

**To be reviewed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Date)**

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Diocesan Bishop)**