

Worship Office

Archdiocese of Newark

Annual Request for Lengthy (or Perpetual) Exposition of the Blessed Sacrament

Parish/Institution:	SEND THIS COMPLETED FORM TO THE REGIONAL BISHOP
Pastor/Administrator/Chaplain:	FOR YOUR COUNTY ANNUALLY
Address:	DURING THE EASTER SEASON FOR THE PERIOD FROM THE
City/Zip:	Most Holy Body and Blood
Phone:	of Christ (Corpus Christi)
Email:	OF THE CURRENT YEAR UNTIL THE FOLLOWING YEAR.
The Archbishop of Newark is responsible for all matters pertaining to the Eucharist and adoration and devotion to the Blessed Sacrament outside I All parishes and institutions are to comply with the "Directives for Lengt the laws and norms regarding exposition of the Blessed Sacrament.	Mass within the Archdiocese of Newark.
Our Parish/Institution is seeking permission for lengthy (or perpetual) expe (If granted, this permission must be requested annually for renewal.)	osition of the Blessed Sacrament.
Does the parish have a separate chapel for exposition of the Blessed Sa (Separate from the body of the church, with an entrance from the outside)	acrament?
YesNo	
If yes, please list the hours of access to the chapel:	
If yes, what security measures are in place for the chapel?	
Lock Access Code Video Cameras Other (please specify))
I, the undersigned, have read, fully understand, and will ensure that this "Directives for Lengthy or 'Perpetual' Exposition" and will strictly adhere exposition of the Blessed Sacrament without exception.	
Pastor/Administrator/Chaplain Signature	Date