



**LAY FRATERNITIES OF ST. DOMINIC  
PROVINCE OF ST. JOSEPH**

**REGION FRATERNITY VISITATION REPORT**

Region #: \_\_\_\_\_ Fraternity: \_\_\_\_\_ Location: \_\_\_\_\_

Date: \_\_\_\_\_ President: \_\_\_\_\_ Present?  Yes  No

If "No", meeting conducted by: Name: \_\_\_\_\_ Title: \_\_\_\_\_

Religious Assistant Name: \_\_\_\_\_ Present?  Yes  No

Total Number of Members: \_\_\_\_\_ Active: \_\_\_\_\_ Excused: \_\_\_\_\_ Inactive: \_\_\_\_\_ Temp: \_\_\_\_\_ Novices: \_\_\_\_\_ Postulants: \_\_\_\_\_

Total Number Present at this Meeting: \_\_\_\_\_

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**PROCEEDINGS:** (Briefly describe general format of meeting) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**PRAYER:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Are members proficient in praying the Liturgy of the Hours?  Yes  No

**APOSTOLATE: Denotes the specific activity undertaken by Dominican entities as a whole, or members as individuals, to fulfill the priorities of the Order.**

Fraternity Apostolate(s): \_\_\_\_\_

Member(s) Apostolate(s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**STUDY:** (Briefly describe general format, facilitator, and topic(s))

Postulancy: \_\_\_\_\_

Novitiate: \_\_\_\_\_

Temporary Professed: \_\_\_\_\_

Perpetual Professed: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**COMMUNITY:** (Briefly describe activities) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**BUSINESS ITEMS DISCUSSED:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**RECORDS:** Are members' records properly retained and updated?  Yes  No  
Who is custodian? \_\_\_\_\_ Is there a designated storage area?  Yes  No  
Does Secretary have current names/addresses of Region/Province officials to submit Minutes?  Yes  No  
Are Fraternity Minutes sent to Region/Province on monthly basis?  Yes  No  
Are Fraternity forms (e.g. Transfer Form; Election Form; etc.) submitted in a timely fashion?  Yes  No  
Was an updated Membership Listing submitted for current fiscal year?  Yes  No

**FINANCES:** Does Fraternity have its own bank account?  Yes  No Fraternity acct. balance: \$ \_\_\_\_\_  
Fraternity dues?  Yes  No Amount: \$ \_\_\_\_\_ Method (e.g. set amt, "pass the basket", etc.): \_\_\_\_\_  
Total Number of Members Dues Paid for Current Fiscal Year:  Region \_\_\_\_\_  Province \_\_\_\_\_  
Total No. of "Hardship" members: \_\_\_\_\_ Is Fraternity able to help "hardship(s)" in paying dues?  Yes  No

**COUNCIL:** Does the Fraternity have a Council?  Yes  No Number on Council: \_\_\_\_\_  
Number elected: \_\_\_\_\_ Number appointed: \_\_\_\_\_ Title(s) of Appointed: \_\_\_\_\_  
Regular elections:  Yes  No If "No", state reason: \_\_\_\_\_  
Regular meetings:  Yes  No If "No", state reason: \_\_\_\_\_

**Members' Request(s) of Region:** \_\_\_\_\_  
**Members' Request(s) of Province:** \_\_\_\_\_  
**Members' Request(s) of Provincial Promoter:** \_\_\_\_\_

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**Comments & Notes:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Submitted by: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Cc: Provincial President  
Provincial Archives  
Provincial Promoter

Provincial Form B  
April, 2010  
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