

CURSILLO TEAM APPLICATION

Please print clearly.

Full Name: _____ Date: _____

Nickname: _____ Gender: M F

Street Address: _____ City State, Zip: _____

Daytime Phone: (____) ____-____ Evening Phone: (____) ____-____

E-mail Address _____ Cell Phone: (____) ____-____

Parish & City: _____

Weekend you are applying for: (Please check one block)

MEN'S WOMEN'S COED or CONCURRENT

Cursillo Weekend / Table: _____

Age Group: 20-30 31 -40 41-50 51-60 61 -70 70+

Are you currently grouping? Yes No Spiritual Direction? Yes No

Do you attend at least 1/2 of the Ultreyas in your area yearly? Yes No

If not, please explain: _____

List Talks you have previously prepared (indicate p = primary, b = backup):

List Weekends served and Team position:

Indicate () the Team position you feel led by the Holy Spirit to fill:

Talks Kitchen Coordinator Chapel Music Table Warden Other: _____

Will you need financial assistance? Yes No

Applicant's Signature: _____ Date: _____

Clergy Endorsement (Any Clergy Person in the Diocese) *Please print clearly.*

Name: _____

Parish: _____ Position: _____

Does the Applicant participate in Parish Activities? Yes No

Does the Applicant worship God regularly in Church? Yes No

Does the Applicant group regularly with other Cursillistas? Yes No

Does the Applicant regularly attend Ultreyas? Yes No

Other Comments:

Clergy Signature: _____ Date: _____

**Return to: Cursillo in Southern Virginia
PO Box 11027
Norfolk, VA 23517**

COST OF THE WEEKEND is \$275 (double occupancy). A \$100 deposit is due at the first team meeting, with the remaining balance by the last team meeting.