

“Cursillo- A Short Course in Christianity”



Application Form: Please Print

Application Completion Date		Male <input type="checkbox"/>	Female <input type="checkbox"/>	These spaces for Pre-Cursillo section only		
Applicant's Personal Information						
Full Name:						
	<i>Last</i>		<i>First</i>		<i>MI</i>	
Do you want to be referred to by your nickname?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Preferred Nickname			
Address:	Street Address				Apartment/Unit #	
	City			State	Zip code	
Home Phone:		Cell Phone:		Fax Phone:		
E-mail Address:						
Are you Catholic?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	What Parish?		Occupation	
Marital Status	M <input type="checkbox"/>	S <input type="checkbox"/>	Spouse Name		# of Children	Work Phone
Did your Spouse make a weekend?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If so, when?		If so, where?	
Do you have any allergies, health problems, or special diet restrictions that might require additional assistance during the Cursillo Weekend? If yes, please list below.					Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you taking medication? If so, please list below.						
Do you have any mobility issues that might require us to provide you with assistance during the Cursillo Weekend? If yes, please list below.					Yes <input type="checkbox"/>	No <input type="checkbox"/>
On the space below, please tell us what you think Cursillo is.						
Has your sponsor invited you to “group reunion and Ultreya?” <input type="checkbox"/> Yes <input type="checkbox"/> No? Please share some thoughts of each.						
After the 3-day weekend, are you willing to attend group reunion, Ultreya and Cursillo School of Leaders (CSOL) along with your sponsor?					Yes <input type="checkbox"/>	No <input type="checkbox"/>
Please Print your sponsor's name in the space on the right.						
Applicant signature						
Please Print your name						
Date:						

Weekend cost \$22500. Deposit \$50.00 (not refundable). Make checks payable to ‘Washington Cursillo Movement’

- Applications with deposits MUST be received on or before 3 weeks prior to the date of the weekend to begin.
- Cancellations more than three weeks before the date of weekend, (by 5 PM (Eastern Standard Time) (15 business days before) will receive a full refund.
- Cancellations at three weeks prior to the date of the weekend or less, but more than one week before the weekend, will receive a refund of half (50%) of the amount paid for the registration.
- Cancellations one week or less up, until the date of the weekend, including no-shows will receive no refund. For extenuating circumstances, the Secretariat will make the final decision regarding refunds.

Revised 9/18/2020

Candidate's Name											
Sponsor/Co-Sponsor Information											
<i>Sponsorship for a Cursillo is essential for the candidate. The Candidate MUST have a friend who is living the Cursillo method. If the sponsor is not in the position to do this, we suggest they have a co-sponsor to help sponsor the applicant.</i>											
Sponsor Contact Information											
Sponsor Last Name			Sponsor First Name				Sponsor M.I.				
Street Address			City		State	Zip	Apartment/Unit #				
Sponsor Home Phone:					Mobile Phone:						
Sponsor E-mail Address:											
Co-Sponsor Contact Information (If Applicable)											
Co-Sponsor Last Name			Co-Sponsor First Name				Co-Sponsor M. I.				
Co-Sponsor Street Address			City		State	Zip	Apartment/Unit #				
Co-Sponsor Home Phone					Mobile Phone:						
Co-Sponsor Email Address											
Date & No. of Weekend the applicant wishes to attend?		Is this your 1 st time sponsoring?		What date did you make your Weekend?		Are you currently in Group Reunion?		What was your Group Reunion Attendance			
Date:		No.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Mo	Year	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Weekly <input type="checkbox"/>	Monthly <input type="checkbox"/>	
Which Ultreya do you attend?		How often do you attend Ultreya?			# Times Candidate has attended Ultreya		Has your Candidate attended a Group Reunion?				
		Weekly <input type="checkbox"/>			Monthly <input type="checkbox"/>		Bi-Monthly <input type="checkbox"/>		Yes <input type="checkbox"/>		No <input type="checkbox"/>
To the right of this box, check all activities you have been a participant over the past 3 years.		<input type="checkbox"/> Quarterlies <input type="checkbox"/> Past workshops <input type="checkbox"/> CSOL <input type="checkbox"/> Annual Picnic <input type="checkbox"/> Regional/Natl Encounters <input type="checkbox"/> Advent Day of Reflection			If you have worked in any of the sections listed at the right (past or current), please check all that apply.		<input type="checkbox"/> Finance <input type="checkbox"/> 3 day <input type="checkbox"/> 4 th day <input type="checkbox"/> CSOL <input type="checkbox"/> Ultreya Leader <input type="checkbox"/> Communications <input type="checkbox"/> Pre Cursillo				
In the future, are you willing to support the Cursillo in some of the activities cited above?		Are you willing to take your candidate to some of the activities cited above for the next year?			Check the areas of the Cursillo Method you feel the candidate was receptive and would be willing to practice.						
Yes <input type="checkbox"/>		No <input type="checkbox"/>			Yes <input type="checkbox"/>		No <input type="checkbox"/>			<input type="checkbox"/> Small Group <input type="checkbox"/> Ultreya <input type="checkbox"/> CSOL <input type="checkbox"/> Cursillo activities	
Pastor or Spiritual Advisor Information											
Pastor or Spiritual Advisor's Name:											
Mailing Address:											
City		State:		Zip code		Home Telephone #					
Pastor/ Advisor Parish		.			Email address:		Cell #				
Signature:											
Ultreya Leader Information											
Ultreya Leader's Name Printed											
Cell #				Email Address							
Has the applicant attended an Ultreya? Yes <input type="checkbox"/>				No <input type="checkbox"/>		Which location?					
Does the sponsor attend Ultreya regularly? Yes <input type="checkbox"/>						No <input type="checkbox"/>		Occasionally <input type="checkbox"/>		If so, which Ultreya?	
Does the sponsor attend Group Reunion? Yes <input type="checkbox"/>						No <input type="checkbox"/>		Occasionally <input type="checkbox"/>		Home Telephone #	
Ultreya Leader Signature:								Date:			
Ultreya Leaders, please Mail Applications with Deposit to:											