

## Cursillo Team Application

(Please Print)

Name					Preferred Name:					
Address:										
City:					State:		Zip:			
Home Phone:			Mobile Phone:			E-Mail:				
Parish:							City:			
Your Cursillo #:		Year:		Diocese:						
Are You Grouping?		Yes	No	Attending Ultreya?		Yes	No	Attending SoL?	Yes	No
Do you have any health problems or mobility issues?			If "Yes", please explain:							
Do you have any dietary restrictions?			If "Yes", please explain:							
Smoking options at the facility are limited. Do you smoke?			If "Yes", how often?							
Age:		Do you play any musical instruments?								
Why are you volunteering?										

### Previous Cursillo Team Experience (Most Current)

Cursillo #	Year	Team Position	Rollo

I am currently Grouping and Attending Ultreya Regularly. I agree to attend all team meetings (or let the Rector/Rectora know). I understand the current cost of the weekend is \$250.00

Signature \_\_\_\_\_ Date \_\_\_\_\_