

Diocese of San Jose – Cursillo Secretariat

P.O. BOX 6648
SAN JOSE, CA 95150

APPLICATION FOR CURSILLO

The Cursillo week-end is designed to bring a deeper understanding of Christian Life through experienced community, and to provide an opportunity for spiritual growth within the Roman Catholic Tradition. It does **NOT** seek to resolve personal or relational problems. The week-end begins on Thursday evening and concludes on Sunday evening. *A \$50.00 nonrefundable deposit should accompany this application (make checks payable to: San Jose Cursillo Secretariat).*

Please TYPE or PRINT all information legibly:

Candidate's Name (first/last): _____ Birth date: ___/___/___

Name you go by for your name tag on weekend (first & last): _____

Address: _____ City _____ State _____ Zip: _____

Cell Phone: _____ Work or Home Phone _____ E-Mail: _____

List any Physical limitations: _____

List any Dietary limitations: _____

Marital Status: Married Divorced Separated Single Occupation: _____

If married: Has spouse made Cursillo? No Yes If yes, when/where? _____

Is spouse applying at this time? No Yes For which Cursillo? Spring Fall

I am Catholic Parish: _____ I am a Priest, Deacon, Religious Brother or Religious Sister

Cursillo preferred: Spring Fall Sex: Male Female

Applicant's signature: _____ Date: ___/___/___

Sponsor's Name: _____ (PLEASE PRINT ALL INFORMATION LEGIBLY!)

Address: _____ City _____ State _____ Zip: _____

Cell Phone: _____ Work or Home Phone _____ E-Mail: _____

Date of your Cursillo/ Where? _____ Parish: _____

Are you a member of a Group Reunion (4th Day)? No Yes

Sponsor's signature: _____ Date: ___/___/___

All information and signatures are required for application processing. Please send this application and the deposit to the Secretariat address listed above.

-- FOR SECRETARIAT USE ONLY --

Secretariat Signature: _____ Date: ___/___/___ Deposit: _____