

Application to Attend a Cursillo Weekend (Please Print)

Catholic Cursillo Movement of the Archdiocese of Cincinnati P. O Box 317655 Cincinnati, OH 45231 - 7655

http://www.cincinnati-cursillo.org/

Date	Sponsor's N	ame:			
Name:		(Nickname)			
Address:				APT. #	
City:	Sta	ate:	Zip Code	e:	
Phone Numbers: Home	Cell		Work		
E-mail Address:		Parish			
Age: Marital Status: (Circle one)	Married Divorced	Separated	Widowed		
Occupation:					
Emergency Contact Information: Name		Relationship	o	Phone	
Are you an active member of any parish or rel	ligious community	or organizat	ion? Y N	If yes list below:	
Do you have any dietary restrictions? Y N	If yes please expla	ain below:			
Are you on any medications or do you have ar					
Please state briefly why you would like to be i	nvolved in the Curs	sillo Movem	ent and wha	it you expect from it.	
Signature					

Mail your completed application to the address at the top of the application or scan and email a copy to precursillo@cincinnati-cursillo.org

Important Information Regarding Your Application

The information requested above is necessary for proper placement on a weekend. Please provide ALL requested information. If a question does not apply, mark N/A. Your application helps us to determine when to offer a weekend. A date will be confirmed for the weekend once a sufficient number of candidates have applied. We allow enough time for most people to fit this date into their schedule. Once a date is set, you will be notified of the exact date, cost, and location (always within the diocese). At that time you will need to confirm with your sponsor that you wish to attend that specific weekend and send a deposit of \$25 or full amount to the above address. (If cost is a factor, talk to your sponsor.) Once the deposit is received, you will receive a confirmation notice. Do not send in a deposit until you wish to be confirmed for a specific weekend. Address any questions to precursillo@cincinnati-cursillo.org