

DIOCESE OF CHARLESTON, SOUTH CAROLINA

			CAI	NDIDATE API	PLICATIO	ON					
Name:						Date of Birth:					
Address:						Gender:	F		М		
City; State; Zip	City				State		Zip				
Home Phone:					Cell Phone:						
Email Address:											
Marital Status:	atus:			Spouse Name:							
Is Your Spouse Catholic?				Has your Spouse	made a Cı	ursillo?	T				
NAME OF PARISH											
Are you invol Ministi		any						_			
			El	MERGENCY C	CONTAC	Т					
Name:											
Relationship:			Phone:								
	AN	Y HE	ALTH PROBLEMS,	DIETARY RES	STRICTIC	ONS, OR SPECIA	AL NEE	DS?			
CURSILLO INFORMATION											
Any friends or	relative	es who	are involved in the (Cursillo Moveme	ent?						
		<u></u>					YES			NO	
	Are you receiving the Sacraments?										
			Have you read th			ement - What is it"?	<u> </u>				
Has your sponsor explained 'Group Reunion'?											
				Has you	r sponsor e	explained 'Ultreya'?					
Why would you I	like to a	ttend a	Cursillo Weekend?								
SIGNATURES											
Further, that the	Cursillo	Week	f the Cursillo Movement end is a "Short Course" i Id in which I live, work	n Christianity and							
Signature of Can	didate:					Date:					
Signature of Spor	nsor:					Date:					
Signature of eith Pastoral associat		y or				Date:					