

CATHOLIC CURSILLO - DIOCESE OF KNOXVILLE

APPLICANT INFORMATION Please return this application to your sponsor with a \$10.00

Check made payable to Catholic Cursillo - Diocese of Knoxville - The \$10.00 application fee is non-refundable.

This information will be kept in the strictest confidence and must be completed before an applicant can be accepted for the Cursillo.

Name \_\_\_\_\_ Nickname: \_\_\_\_\_  
Last First MI City State: Zip

Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ email: \_\_\_\_\_

Number of Children: \_\_\_\_\_ Your Age: \_\_\_\_\_ Occupation: \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_

Widowed Yes \_\_\_ No \_\_\_ How long? \_\_\_\_\_ Divorced \_\_\_\_\_

Are you a convert? Yes \_\_\_ No \_\_\_ If Yes, how long? \_\_\_\_\_

If you are married, is your spouse Catholic? \_\_\_\_\_ Yes \_\_\_ No \_\_\_

Home Parish: \_\_\_\_\_ Location: \_\_\_\_\_

In what religious, parish and/or community organizations are you active?

\_\_\_\_\_  
\_\_\_\_\_

Do you play an instrument? \_\_\_\_\_ Which instruments? \_\_\_\_\_

Why do you want to attend a Cursillo weekend? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Do you have any physical, medical or dietary conditions that need to be provided for on a weekend?

\_\_\_\_\_

Emergency Contact Phone Number: (\_\_\_\_) \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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SPONSOR SUPPORT - Your sponsor will complete the remainder of this application.

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ e-mail: \_\_\_\_\_

Home Parish: \_\_\_\_\_ Location: \_\_\_\_\_

Are you active in the following activities? Group Reunion \_\_\_\_\_ Ultreya \_\_\_\_\_ School of Leaders \_\_\_\_\_

If you are not active please explain: \_\_\_\_\_

What is your relationship to the applicant and how long have you known them? \_\_\_\_\_

Sponsor comments: (Please include any information that may affect the candidate's participation in Cursillo)

As a sponsor I understand my responsibilities are:

- To guide my candidate to a Group Reunion and Ultreya after the Cursillo weekend (***For at least one Year!***)
- To discuss the Cursillo with my candidate to assure their attending will not cause any family difficulties.
- To bring my candidate to the Cursillo and support him/her through prayer.

Sponsor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PASTORAL SUPPORT

I support the sponsorship of this member of my parish to Cursillo. I know of nothing that will limit their participation.

Pastor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_