## APPLICATION TO SERVE ON A CURSILLO TEAM

"Cursillo is not a weekend, but a way of life. It is a calling to prayer, study, action, and living in a way that witnesses to others that God is with us, bringing hope to others that they too, are loved. We are the ones who will change the world, one person at a time. Through us God's love is made known when we become the willing instruments of His grace."

Name Today's I Please Print) First Name Last Name Nickname			Today's Da	te	
Address					
Phone (HM)	(WK)	Age	Birth date _		_(MM/DD)
Email Address		Fax Number			
Marital Status (check one):					
Married Separated	l/Divorced Wi	idowed Sing	gle		
How long?					
Religious Affiliation:		(de	enomination)		
Parish/Church Name					
Address					
City/State					
I became a Cursillista in	(year) at _		(place)		
Name of Rector/Rectora					
Have you attended a SF/SM	1 Secretariat Sponso	rship (1) Hour W	orkshop?	When? _	(year
Have you attended a Leader	rship Workshop?	When? _	(year)		

## Cursillo Work History: (listing most recent first - continue on back, if necessary)

Month/Year	Name of Rector/a	Role	Rollo/Talk Given

## **Service Preference**

Team meetings and preparations begin at least six months before a Cursillo Weekend. This is a time for the team to build community that we might be an effective witness of Christian community to the candidates. Therefore, it is critical that in your prayerful consideration in applying to serve on a Cursillo, you are prepared to attend all meetings as required of your position.

Best time of year t	for you to serve (check one):	Winter (Jan) Sum	mer (May) Fall (Oct)		
Position Preference	e (number priority) :				
Table Leader	CookMOSSAF	Music Director	_		
Asst. Music Direc	tor Head Cook	Asst. Head Cook	Spiritual Director		
Briefly describe 4	th Day and Parish/Church act	ivities in which you are	involved		
			or bring to Cursillo?		
Do you have any p	physical or health consideration	ons?			
In an effort to pro	mote the selection of ethnical	ly diverse teams we wo	uld ask that you complete the following:		
African American	American Indian A	Asian Caucasian	Hispanic Other		
Signature			Date		
MAIL FORM TO: SF/SM CURSILLO SECRETARIAT P. O. BOX 280972 SAN FRANCISCO, CA 94128-0972 ************************************					
Month/Year	Name of Rector/a	Role	Rollo/Talk Given		
		1			

## (Rector/Rectora Use Only) Record of invitation declines:

If an applicant for service declines an invitation to work 4 times in 5 years, the application will be pulled and the applicant will be asked to submit a new application for future service.

Date	Response	Date	Response	Date	Response