



**THE LONDON AREA CATHOLIC CURSILLO MOVEMENT
THE DIOCESE OF LONDON, ONTARIO
CANDIDATE APPLICATION**

Confidential (Internal Use Only)

PLEASE PRINT ALL INFORMATION CLEARLY

Male Female

Name: _____
First Middle Initial Last

Name tag: _____
Preferred name on weekend

Address: _____
City Postal Code

Age: _____

E-Mail: _____

Home (____)____-____ Work (____)____-____

Cell (____)____-____

Marital Status: _____ If Married, Spouses' Name: _____

Number of Children: _____ Occupation: _____

List any circumstances requiring special considerations (include physical, medical and any special dietary needs). We can accommodate special foods in the kitchen that you may require to take along.

Have you been advised of the suggested cost of the weekend? Yes No

Are you of the Catholic Faith? Yes Other? (specify) _____

Church You Attend: _____
Name

City

Pastor Telephone (____)____-____

What inspired you to want to make a Cursillo weekend? _____

Do you play a musical instrument which you can bring with you? Yes No If yes, which one? _____

List any religious or community activities in which you are involved: _____

Sponsor's Name _____ Telephone (____)____-____

A Cursillo is an encounter with oneself, with Christ and with others. The presentations are designed to help the participants to better know themselves, to know Jesus more deeply and finally to suggest ways to take what is learned back to one's environments. The London Area Catholic Cursillo Movement follows Catholic Church teachings and practices of the faith. I am willing to take part in this weekend knowing that it consists of 3 days and 3 nights, (Thursday night at 7:00P.M. to Sunday night at 7:00 P.M.) and that my continuous attendance is required to fully experience and understand the Cursillo weekend. I expressly waive all claims against the London Area Catholic Cursillo Movement, or their representatives, on account of any accidents, injury, illness, or other damage that may occur in connection with, or incidental to my attendance on the weekend.

Your Signature _____ Date ____/____/____

OFFICE USE: Date Received _____ Application No. _____