

CANDIDATE APPLICATION

The Cursillo Weekend is a religious experience which is presented to deepen your Christian understanding. It is inspiring, joyful, and instructional in living a fuller Christian life.

The Weekend is a structured three-day experience which utilizes modern group techniques to bring you (the candidate) into a renewed relationship with Jesus Christ, the Church, and fellow Catholics.

Please be sure to fill out this application as completely as you can, then return to your sponsor.

****PLEASE PRINT CLEARLY****

Name _____
Last First Nickname (for name tag)

Address _____
Street City State Zip

Preferred phone # _____ Email _____

Date of birth _____ Age _____

Present Parish _____ Date joined _____

Pastor's name _____

Employer _____ Occupation _____

Education level _____ Diploma/Degree _____

Single ____ Divorced ____ When? ____ Widowed ____ When? ____

Married ____ Spouse's Name _____ Spouse's Cell Phone _____

If married, when? _____ What Church? _____

No. of children ____ Ages _____

Your religion _____ Spouse's religion _____

Is your present marriage blessed by the Catholic Church? Yes ____ No ____

Has your spouse made the Cursillo? Yes ____ No ____ If yes, when? _____

Where? _____ Cursillo # _____

Since the Eucharist is so central to the essence of the weekend, only those Catholics who are eligible to receive Holy Communion should attend. Do you understand that Catholics, married outside the Church without the blessing of the Catholic Church, cannot attend the weekend?
Yes ___ No ___

Has your sponsor made you aware that there is a continuing program of spiritual growth after the weekend? Yes ___ No ___

The Cursillo Weekend is based upon an intense schedule that occupies the majority of your time. Because of this intense schedule, if you have a physical disability, condition, or an emotional problem for which you have been or are now undergoing treatment, it may be better to make a Cursillo at a later date. Please consider this carefully and discuss with your sponsor.

Do you have any special dietary requirements (e.g., diabetic; gluten free; low or no salt; vegetarian or vegan; food allergies, etc.)? Yes ___ No ___

If Yes, please specify so we can be prepared to provide appropriate meals:

Do you suffer from any other condition(s) which could cause some challenges or difficulties during the weekend (e.g., medications; mobility issues; etc.)? Yes ___ No ___

If Yes, please specify: _____

Smoker ___ Non-Smoker ___

Emergency contact name (in addition to/other than your spouse) _____

Emergency contact phone #(s) _____ Relationship _____

Weekend fee is \$250.00 (which includes private room and 10 meals/snacks); preferred deposit (refundable) is \$50.00 (payable to Palm Beach Cursillo).

Are you interested in learning about installment payment plans and/or scholarship funds to assist with paying the Weekend fee? Yes ___ No ___

Candidate's signature _____ Date _____

Sponsor's Name _____

Sponsor's signature _____ Date _____

**RETURN COMPLETED APPLICATIONS
AND DEPOSITS TO YOUR SPONSOR,
IF POSSIBLE. IF NOT, MAIL TO:**

Palm Beach Cursillo
P.O. Box 30563
Palm Beach Gardens, FL 33420

Note: You will be notified if a place can be confirmed for you on a Cursillo Weekend. If you find you cannot attend on the date given to you, please call the telephone number listed on your acceptance letter as soon as possible, and then immediately advise your sponsor. God Bless You!