

# Marin Cursillo Application Form



## Candidate Information:

Your application can be entered online at: [www.marincursillo.com](http://www.marincursillo.com)  
 Your contribution for the Marin Cursillo Weekend is \$100 for food and lodging. Scholarships are available.

|  |                                 |                             |                      |   |        |
|--|---------------------------------|-----------------------------|----------------------|---|--------|
| First Name:  |                                 | Last Name:                  |                      | Nickname:   |        |
| Male (___) Female (___)  | Lay Person: (___) Clergy: (___) | Married: (___) Spouse Name: |                      |   |        |
| Address:   |                                 |                             |                      |   |        |
| City:  |                                 |                             |                      | State:  | ZIP:   |
| Home Ph:   |                                 | Work Ph:                    |                      | Cell:   |        |
| Email Address:   |                                 |                             |                      |   |        |
| SPECIAL NEEDS: <b>Dietary:</b> Yes (___) No (___) <b>Physical:</b> Yes (___) No (___) <b>Other:</b> Yes (___) No (___)   |                                 |                             |                      |   |        |
| DESCRIBE ANY SPECIAL NEEDS YOU MAY HAVE ON WEEKEND:  |                                 |                             |                      |   |        |
| Why do you want to attend a Cursillo Weekend?  |                                 |                             |                      |   |        |
| Cursillo Weekends are open to all baptized Christians. Have you been baptized? Yes (___) No (___)  |                                 |                             |                      |   |        |
| Church / Parish Name:  |                                 |                             |                      | City:   | State: |
| Priest/Pastor Name:  |                                 |                             | Priest/Pastor Email: |   |        |
| Emergency Contact:   |                                 | Home Ph:                    |                      | Cell:   |        |
| Emergency Contact Email:   |                                 |                             |                      |   |        |
| I wish to attend a Marin Cursillo Weekend at the Angela Retreat Center and do hereby release Marin Cursillo, its directors and/or agents from all liability associated with participating in Marin Cursillo. |                                 |                             |                      |   |        |
| Today's Date: / /201__   |                                 | Signature:                  |                      |   |        |
| <b>Sponsor's Information (SPONSOR MUST HAVE ATTENDED A CURSILLO WEEKEND.)</b>  |                                 |                             |                      |   |        |
| Name:  |                                 |                             |                      | Home Phone:   |        |
| Address:   |                                 |                             | City:                | Zip:  |        |
| Email address:   |                                 |                             |                      | Cell Phone:   |        |
| Sponsor Church Affiliation:  |                                 | Priest/Pastor Name:         |                      | Priest/Pastor Phone:  |        |
| How long have you known candidate?   | Year of Your Weekend:           | Location of Your Weekend:   |                      |   |        |
| Will candidate have a 4 <sup>th</sup> day option after the weekend?: Yes (___) No (___)  |                                 |                             |                      |   |        |
| How will you support your candidate during his/her weekend and with 4 <sup>th</sup> day?   |                                 |                             |                      |   |        |
| Today's Date: / /201__   |                                 | Signature:                  |                      |   |        |
| <b>Where to send completed Application and Payment</b>   |                                 |                             |                      |   |        |
| Mail to: <b>MARIN CURSILLO COMMUNITY, APPLICATIONS, 21 Lincoln Park, San Anselmo, CA 94960</b>   |                                 |                             |                      |   |        |
| Please include a check for \$100 made payable to Marin Cursillo  |                                 |                             |                      |   |        |
| For questions and additional information Contact: Cathy Cunningham 415 453-7174  |                                 |                             |                      |   |        |
| Contact: Cathy Cunningham  |                                 | 415 453-7174                |                      | Email: <a href="mailto:deaconedandcathy@sbcglobal.net">deaconedandcathy@sbcglobal.net</a> |        |