

Cursillo Team Registration Please print very legibly		Today's date:					
		Weekend date:					
Name							
Preferred nickname (if any) for nametag							
Are you ordained?	Deacon	Priest	Bishop	In process	Wondering about	No	
Gender		Date of birth: ___/___/___		Age: _____			
Role	Music	Palanca	Kitchen	Cha	Table leader	Rollista	Spiritual Team
	Sacristan	Angel Chair	Angel on Thurs	Fri	Sat	Sun	Rector or Vice QMaster
Address	Street		PO Box				
	City	State	Zip				
Phone	Cell: Area Code ()		Home: Area Code ()				
Email							
Current church				City/State			
Special talents?		Year of my Cursillo		Year last worked Team:			
Allergies	Foods (list):		gluten	dairy	nuts		
	Tobacco	Perfumes	Other :				
Any dietary needs for the weekend?	Vegan	Vegetarian	Low sodium	Low carb options			
Medical conditions team needs to know?							
Any medical needs for the weekend?							
Will you be sponsoring a candidate this weekend? No Yes (name _____)							
May we have your permission to use your picture and name on the Cursillo website, email, and social media (e.g., Facebook)? Yes No							
Emergency contact person	Name/Relationship			Phone			
Team fee \$100 Angels: \$13/night	Date paid:						
Your signature	Name			Date			
COVID vaccination	Date completed:		Please enclose copy of card				

Thank you for your interest in Cursillo. Cursillo Team Registration Form June 11, 2021