



Oakland Cursillo Community

Send Applicant Form to:

Secretariat
Oakland Cursillo
P. O. Box 2841 Dublin, CA 94568
(510) 332-3573
jackiepalacios@yahoo.com

APPLICANT FORM DIOCESE OF OAKLAND

The Cursillo community is dedicated to the proposition that a deep spiritual life in union with God is possible for lay Christians. It aims to help lay Christians experience that life by connecting with a spiritual community and following a program of spiritual and educational practices. The Cursillo weekend consists of sacramental liturgies, prayer and meditations, as well as lectures and small group discussions.

The Cursillo community encourages commitment to Christ. Baptized Christians looking to grow closer to Christ may apply. Applicants typically will be over the age of 25 (although persons under this age are considered carefully), and should not be involved in serious personal, marital or family problems.

The Cursillo community of Oakland was founded by Roman Catholics and primarily recruits from that denomination. Applicants from other Christian communities are welcome to apply, but all applicants should be willing to participate in all of the spiritual and educational practices, and understand that they will be asked to contribute their own faith experiences and insights to the discussions.

Men and women's Cursillo weekends are typically scheduled close together to encourage married couples to share this experience. Married applicants should submit their application forms together, if possible.

PLEASE PRINT LEGIBLY AND INCLUDE EMAIL

DATE: _____

APPLICANT NAME _____ What do you prefer to be called? _____

ADDRESS _____ Phone _____

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS _____ OCCUPATION _____

MARITAL STATUS check one: Married ___ Separated/Divorced ___ Widowed ___ Single ___ How Long? _____

Do You have children? _____ How many? _____ Age of children? _____

EDUCATION _____ YEAR & DATE OF BIRTH _____

RELIGIOUS DENOMINATION _____ BAPTIZED? Yes ___ No ___

PARISH OR CHURCH NAME & ADDRESS _____

ANY ALLERGIES? (Food, Flowers, Perfumes, etc.) _____ MEDICAL & DIETARY NEEDS _____

What is your Church/Community Involvement? _____

(If applicable) IS YOUR SPOUSE PLANNING TO MAKE a Cursillo weekend? Yes ___ No ___

What attracts you to make a Cursillo weekend? _____

Signature of Applicant

Signature of Sponsor

Signature of Clergy

FOR PRE-CURSILLO WEEKEND COMMITTEE: Date Received: _____ Date Approved: _____

20110329