## **NC Episcopal Cursillo**

## **Weekend Team Member Application**

Mail to: Cursillo c/o Episcopal Diocese of North Carolina, 200 W. Morgan St., Suite 300, Raleigh, NC 27601

Please note, this form must be accompanied by the Team Fee (\$250). Financial assistance is available for team members.

		Team Member In	formation	
Full Name:				
	Last	First	M.I.	Preferred Name
Address:				
	Street Address			Apartment/Unit #
	_			
	City		State	ZIP Code
Phone:	_	Email:		
Marital Statu	ıs:	Gender:	Age:	
Parish Name	e & City:			
Emergency	/ Contact			
Name:	ne: Phone:		Phone:	
Answer the	e following question	s:		
What Cursill	o did you make?		(include state) Year:	
Do you offer	ad Liltrayo?			YES N
Do you atter	id Oilleya?			U
Are you in a group reunion?			YES NO	
				YES NO
Have you ever served on a Cursillo Weekend team before?				
If yes, what	roles have you had on	team? Any talks given?		
To help the vestrictions.	weekend leader know Explain in detail why y	you better, describe yourself and s ou would like to serve on this team	ome of your interests. Include ar Use the back of this sheet if ne	ny health concerns or reded.
		_		
Team Memb	per Signature:		Date:	