

TEAM MEMBER APPLICATION

Maryland Episcopal Cursillo – Three Day Weekend

Name _____ Name on Button _____
Print, please

Address _____
Street City State Zip

Phone (Home) _____ (Cell) _____ (Work) _____

Email _____ Date of birth _____
Month / day / year

Emergency Contact _____ Phone _____

Occupation _____ Marital Status _____

Date, Location and Number of Your Cursillo Weekend _____

How many teams have you served on? _____ In what role(s)? _____

When were you last on a team? (*Date and Weekend* ¥) _____

Have you given rollo(s)? Which? _____

What special talents/interests do you bring to a team? _____

Date and location of your 4th Day Workshop(s) _____

Tell us **how you are living into your 4th Day** and **what elements of the Cursillo Method you are using** – regular group reunion, spiritual direction, ultreya (use back of application if needed) _____

Your Parish _____ Rector _____

Do you require accommodations to satisfy dietary, physical, or medical restrictions? _____ Yes ___ No

(Please detail if YES) _____

Note: Please send completed application to the *Three Day Weekend Coordinator*. An application may be retained for three (3) years and must then be resubmitted. *A new application should be filed after serving on a team.*

After prayerful consideration, I apply for membership on a Maryland Episcopal Cursillo weekend team. **I understand that I must be a Communicant in good standing in the Episcopal Church, make every effort to attend all team meetings, and that I will be asked to contribute time, talent, and finances supporting the weekend** (team members usually pay for their room & meals and contribute food for team meetings and Agape). I agree to read and comply with the Cursillo Weekend guidelines detailed in materials provided by the weekend Rector.

Signed _____ Date _____

PLEASE SCAN AND EMAIL THIS FORM TO:

Marylandepiscopalcursillo@gmail.com

Contact us at the above address for technical assistance.

FEES CAN BE PAID ONLINE by clicking here OR MAILED TO:

The Maryland Episcopal Cursillo

c/o St. Andrew's Episcopal Church, 7859 Tick Neck Road, Pasadena, MD 21122

[Revised October 2024 pb]

Date Application Received _____ Reviewed (date/initial) _____