

Diocese of Lansing | Cursillo Application

First Name Last Name DOB/____/____/____
mo day year

Address City State Zip

Home Phone Cell Phone Email

Marital Status (Circle One) Single | Married | Divorced | Widowed | Separated

If Married, Spouse's Name _____

Number of Children _____

Occupation _____ Retired? Yes No

Parish _____ Parish City _____

Sponsor _____ Telephone _____

Please indicate any special needs you have _____

Applicant's Signature Date

Sponsor's Signature Date

Priest's Signature Date

***This is only an application for Cursillo Weekend. You will receive a letter of acceptance. After completing this application, please return it to the person who is sponsoring you for Cursillo. The cost of the weekend is _____ Please enclose a deposit of _____ with your application form. Balance is payable upon on-site registration. No one will be turned away because of finances. Assistance is available. Please make checks payable to: Lansing Cursillo**