

# GHR Cursillo Application

## General Information for the applicant

Weekend time of arrival: *Thursday, March 18 at 6:00 PM*

Weekend time of departure: *Sunday, March 21 at 5:00 PM*

Cost: **\$150** per person is the usual expense of the Cursillo Weekend at St. Clare of Assisi Retreat Center (620 Buckroe Ave. Hampton, VA 23664). This covers meals, lodging, and supplies.

To ensure a place on the roster, a deposit of \$50.00 must accompany this application (checks payable to *Greater Hampton Roads Cursillo*).

Upon notice of acceptance, a second payment of \$50.00 is requested. The balance is due on or before the Friday of the Retreat. Scholarships may be available. If required, the sponsor should prove a written brief justification with this application.

If for some reason you are unable to attend, your application will be automatically carried over to the next scheduled weekend unless instructed otherwise. If, however, you must cancel a second time, your application will be returned and may be resubmitted when you are better able to attend. A refund of tuition paid (less the deposit(s)) may be obtained by a written request to the Pre-Retreat Coordinator.

Work closely with your sponsor. Discuss your expectations. Together, complete and return the next three pages with a deposit to the Pre-Retreat Coordinator listed below.

Cursillo Coordinator  
1568 Manufacture Dr.  
Williamsburg, VA 23185  
[ghrcursillo@gmail.com](mailto:ghrcursillo@gmail.com)  
757-874-5670

# Greater Hampton Roads Cursillo

Please Print Clearly

The Cursillo is a worldwide movement of the Catholic Church. It provides a method of living the Christian life where one's spirituality may be developed, lived, and shared. The three day weekend experience is a joyous introduction into a supportive and growing community of friends in Christ--men and women who are working to bring Christ into their everyday lives. The Cursillo is designed to make it possible to live in union with Christ and to desire to bring others to Christ.

***Before continuing with this application, please remember that a person may live a Cursillo only once. Have you ever lived a Cursillo? \_\_\_ Yes \_\_\_ No***

If yes, Cursillo Date: \_\_\_\_\_ Location: \_\_\_\_\_

**Candidate:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Name Preferred to be called: \_\_\_\_\_

Address: \_\_\_\_\_ : \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #'s: Home: \_\_\_\_\_ Cell : \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Parish Name and Address: \_\_\_\_\_

Relationship Status:

Single  Married  Widow(er)  Div./Sep

Priest  Order  Religious  Deacon

If married, are you married in the Catholic Church?  Yes  No

Spouses Name: \_\_\_\_\_

Is your spouse planning to live the weekend?  yes  no

Spouses Cell \_\_\_\_\_ Work \_\_\_\_\_ Home \_\_\_\_\_

Emergency Contact

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Are you able to receive the Sacraments? \_\_\_Yes \_\_\_No

Do you have any medical problems, handicaps, or other needs we should be aware of? (i.e. special diet, medical, problems with stairs) \_\_\_Yes \_\_\_No

If yes, please explain:

Allergies:

\_\_\_\_\_ Date

\_\_\_\_\_ Candidate signature

Priest or Deacon

Is the Candidate able to receive the Sacraments? \_\_\_Yes \_\_\_No

Is the Candidate someone you would recommend? \_\_\_Yes \_\_\_No

Priest or Deacon Statement:

\_\_\_\_\_ Date

\_\_\_\_\_ Priest/Deacon Signature

**Sponsor**

Sponsor's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: Work \_\_\_\_\_ Cell \_\_\_\_\_ Home \_\_\_\_\_

Email address: \_\_\_\_\_

Parish name and address: \_\_\_\_\_

Which Cursillo Weekend did you live and where: \_\_\_\_\_

How long have you known the candidate?: \_\_\_\_\_

What environments do you know them from?: \_\_\_\_\_

Are you active in group reunions?: \_\_\_\_\_

Fourth day group meeting place: \_\_\_\_\_

Have you explained the Group Reunion and Ultreya to the candidate \_\_\_Yes \_\_\_No

Have you read and understood the Sponsor handbook? \_\_\_Yes \_\_\_No

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**Photograph and Publicity Release Form**

I, \_\_\_\_\_, give the Greater Hampton Roads Cursillo (GHRC) permission to use my name, likeness, image, voice, and/or appearance as such may be embodied in any pictures, photos, video recordings, audiotapes, digital images, and the like, taken or made on behalf of GHRC activities. I agree that the GHRC have complete ownership of such pictures, etc., including the entire copyright, and may use them for any purpose consistent with the GHRC missions. These uses include, but are not limited to illustrations, bulletins, exhibitions, videotapes, reprints, reproductions, publications, advertisements, and any promotional or educational materials in any medium now known or later developed, including the Internet. I acknowledge that I will not receive any compensation, etc for the use of such pictures etc, and hereby release the GHRC and its agents and assigns from any and all claims which arise out of or are in any way connected with such use.

I have read and understood this consent and release.

**I give my consent** to the GHRC to use my name and likeness to promote the GHRC program and/or their activities

\_\_\_\_\_  
Signature

\_\_\_\_\_  
date

**I do not give my consent** to the GHRC to use my name and likeness to promote the GHRC program, its fiscal agent, and/or their activities.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
date