

CURSILLO - EPISCOPAL DIOCESE OF SOUTHWEST FLORIDA

Application to: CURSILLO SECRETARIAT

Name _____

Mailing Address _____

City _____, FL Zip _____ Home Phone (____) _____

Cell Phone: (____) _____ E-mail Address _____

Parish with City _____ Year Round Resident? __YES__ NO

When and where did you attend Cursillo? (Indicate if other than an Episcopal Cursillo)

Do you group regularly? _____ Attend Ultreyas regularly? _____

Cursillo Experience

Why do you feel called to serve on Secretariat?

(Use additional sheet if required)

What gifts do you bring?

What does Cursillo mean to you?

Signature: _____

Date: _____

Rector/Clergy Endorsement (Use additional sheet if required)

Rector/Clergy Name: _____ Parish: _____

Please describe why this person would be a strong addition to the Secretariat.

Signature: _____ Date: _____

Mail to: Dorothy Lowrie 2838 Thunderbay Circle Naples FL 34119 or email to dorothy@mrsreadygolf.com

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