## CURSILLO TEAM APPLICATION AND/OR RECORD OF TEAM WORK EXPERIENCE

Your application is used as reference information for future teams as well as this team.

Please be as thorough as possible.

Name:	Phone #:		Age	
Address:	City:	State:	Zip:	
E-Mail Address:		<del>-</del>		
Date and Place you made yo	ur Cursillo?			
community in the Spirit of the 2. And serving for the fulfill these commitments, ples possible so they or the team of the spirit	o achieve the goals of Se hat you commit to: meetings prior to the wee e Lord prior to the weeke entire weekend. If for sor ase contact the Rector of	ervitude, Dedication dekend; (Building te nd is essential.) me reason you find rectora as soon eplacement for you	on, Charity and eam d you cannot as u.	
Teams are chosen by the Rector at team needs. Please know that ever However, please be open to the po	ry effort will be made to place	you on the team of you		
Capacity in which you would	prefer to work:			
PAST CURSILLO TEAM EXF Capacity Served	PERIENCE: (If Rollo Roo Place	om, please list Rol Dat		
(Use back or additional page	for other experience.)			
9		Date	·	
Please send to: Rita Bowne 60789 Country Club Dr Bend OR 97702 rbowne@rprp.com				