

2024 Nomination Form CURSILLO COMMISSION

(Please print or write legibly)

Name of Nominee _____

Mailing Address _____

City _____ Zip _____ Home Phone (_____) _____

E-mail Address _____

Parish _____

When and where did nominee attend Episcopal Cursillo? _____

Does he/she group regularly? _____ Attend Ultreyas regularly? _____

Name of Cursillista nominating above individual. _____

Your complete mailing address _____

Your home phone number and e-mail address _____

Your parish _____

Have you discussed this with the nominee and explained the criteria and requirements? Yes No

Has the nominee agreed to serve, if elected? Yes No

Cursillo experience of nominee: Weekend teams: When, where, and role on team

Other Cursillo involvement past and present:

Please describe why you feel this individual would be an asset to the Cursillo community and should be considered for election to the Cursillo Commission? _____

Please complete form and e-mail to chair: willfsu1@yahoo.com