



Filipino Group – Diocese of San Bernardino – www.sbcursillo-filipino.org

**AUXILIARY APPLICATION FORM**

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

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Marital Status: \_\_\_\_\_ Spouse: \_\_\_\_\_

Parish: \_\_\_\_\_ City: \_\_\_\_\_

Where did you live your Cursillo weekend? \_\_\_\_\_ Diocese: \_\_\_\_\_

Table Saint: \_\_\_\_\_ Class Year: \_\_\_\_\_ Class Number: \_\_\_\_\_

List the functions you have served in and # of times served during the 3 – Day weekends

	(Function)	(# of times)
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

To be considered for the 3 -Day weekend team, you must:

- Be a Cursillista
- Be an active and practicing Catholic
- Be attending the School of Leaders
- Attend all the team formation classes required in the preparation of the 3 – Day weekend
- Attend Group Reunions and Ultreyas

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Your application will be processed upon receipt. Once completed, you will be notified in due time prior to the Cursillo Weekend. Application Fee: \$200.00. A non-refundable deposit of \$25.00 is required. Please make check payable to: "Filipino Cursillo DSB" OR via "Zelle" to filcursillodsbtreasurer@gmail.com indicate on the note the following: Name, Parish, Men's or Women's Class #*

*(Rev.2.19.2026)*