



CANTERBURY CURSILLO® – WEEKEND APPLICATION FORM



Date of Cursillo Weekend you wish to attend: _____ (01/23)3

Title: _____ Christian Name: _____ Surname: _____ M/F _____

Address: _____

_____ Postcode: _____

Email: _____ Telephone: _____

Name you wish to be called by (for badges etc.) _____ Date of birth: _____

Name and location of Church where you worship: _____

Any special needs e.g. dietary, allergy, disability: _____

In the event of an emergency during the weekend, who would you want us to contact?

Name and connection: _____ Telephone: _____

CANTERBURY CURSILLO weekend costs a total of £275 per person. However, we subsidise this cost and merely ask that you contribute a small payment of £50 for the weekend. This is payable by either your supporter or yourself. Any additional donations would also be much appreciated, and payments or donations can be made by cheque payable to Canterbury Cursillo and submitted with this form or you can transfer directly into our bank account either as a one-off payment or by monthly instalments.

Name: **CANTERBURY CURSILLO. SORTCODE: 30-91-60 ACCOUNT NUMBER: 00405730**

Please use your name as a reference

In the event of a cancellation please could you give at least one weeks notice. Failure to do so may result in the whole cost being charged.

Signature of Applicant _____ Date signed: _____

Name of Supporter: _____ Signature: _____

Address of Supporter : _____

_____ Phone Number : _____

Email address of Supporter : _____

Local Priest/Minister's name* _____ Email _____

Telephone: _____ Date _____

Once completed please return this form along with any donation to:

Lynne Watson, 22 Valley Road, River, Dover CT17 0QN

Telephone : 01304 825232

Email: lynne.watson3@ntlworld.com

DATA PROTECTION

May we keep the details you have supplied on this completed form both on paper and electronically for communication purposes concerned with Canterbury Cursillo now and in the future?

Yes/No (Please indicate) Signed _____