



If you have a **LIFE-THREATENING FOOD ALLERGY** or have any **MEDICAL CONSIDERATIONS**, please describe in detail: \_\_\_\_\_  
\_\_\_\_\_

Please tell us why you would like to serve on this Cursillo weekend: \_\_\_\_\_  
\_\_\_\_\_

Are you willing to serve on a team with both male & female clergy as Spiritual Directors?  Yes  No

**CLERGY:** Would you prefer to serve as a:  Spiritual Director  Lay Team  Wherever needed

**TEAM MEMBER EXPECTATIONS:** As a team member, you are expected to support the weekend through prayer, and through your time, talents, and treasure. Attendance at all team training meetings is expected, and attendance for the full weekend (Thursday afternoon through post-Clausura clean-up on Sunday) is **required**. A donation of \$150 (due by the first team training meeting) is requested of all lay team members. **Please check here  if you desire financial support.** You will be contacted regarding a possible partial or full scholarship. A limited number of Secretariat scholarships are available each weekend. Team scholarships are also occasionally available, but are not to be relied upon, and should be discussed with or requested directly from the rector/a or the team treasurer prior to accepting a call to serve.

**NOTE:** Though not prohibited, it is **strongly suggested** that team members **not** serve as pilgrim sponsors on the weekends they are serving.

**PERSONAL COMMITMENT (If you cannot make this commitment, you should not apply to work):** I recognize and affirm Jesus Christ as my personal Lord and Savior and have made a real commitment to direct my life to God. I am fully committed to pray for the Pilgrims and the Team. I understand that I am expected to be present at all team trainings and any additional meetings pertinent to my task on the weekend.

**EMERGENCY CONTACTS:** In the event of a medical emergency, please provide telephone numbers where emergency contacts can be reached during the weekend.

Primary Emergency Contact: \_\_\_\_\_ Phone: (H) \_\_\_\_\_ (C) \_\_\_\_\_  
Alternate Emergency Contact: \_\_\_\_\_ Phone: (H) \_\_\_\_\_ (C) \_\_\_\_\_

**MEDICAL AND LIABILITY RELEASE:** I, \_\_\_\_\_, understand that Lutheran Cursillo of Southern California does not have trained medical personnel on the weekends. Therefore, in the case of a medical emergency, I hereby authorize a designated Cursillo team member to call emergency response personnel at 911. I also understand that the LCSC team will observe COVID-19 cleaning protocols and will follow all CDC COVID-19 precautions and guidelines.

In addition, I hereby release and discharge Lutheran Cursillo of Southern California and its agents from all claims, demands, actions, and injuries sustained to my person or property as a result of any act, omission, or negligence by LCSC while participating in the Cursillo weekend event for which I am applying. I assume all risks of injury to my person and property and hold LCSC completely and fully harmless from all liability.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_