## Butte Deanery Secretariat Catholic Journey Experience Team Volunteer Application

Journey Applying For: ☐ Women's		□ Men's			Date:				
Name:									
Address:									
City:			State:			ZIP Code:			
Home Phone:	<b>)</b> :			Cell Phone					
Email Address				Emergency Contact Name and Phone					
When I made my Journey \ Cursillo					Location:	1:			
Do you have any health problems, hand we should be aware of? (i.e. special die stairs)					t				
List any medica	al expertis	se (CPR, EMT,	RN etc	.)					
Parish									
Do you attend Mass regularly?									
Are you involve so please tell us involvement									
In what other ways do you enrich your life personally, spiritually, etc?									
Will you commit yourself to attendance of ALL TEAM MEETINGS?									

Please Mark each position you have served in the past (Cursillo/Journey), how many times and then please indicate what roles you would be willing to serve in for the future. Even if you have already done a position and are interested in doing it again, please indicate that.

Team Positions	Have served in the past # of times	Date if known	willing to serve for upcoming weekend
Thursday Dinner Committee			
Welcoming Committee			
Music Captain or Team			
Kitchen Captain			
Kitchen Co-Captain			
Kitchen Prayer Leader			
Kitchen Team Member			
Kitchen Music			
Angel Captain or Crew			
Speaker (Please list which talks)			
Table Leader			
Weekend Leader (Rectora)			
1st time Assistant Weekend Leader			
2nd time Assistant Weekend Leader			
Lay Coordinator			