



# Cum Christo Renewal Weekend

Men & Women

**“Fan or Follower”**

**October 14 - 16, 2022**

**Sacred Heart Parish Center • 316 W Benham, Glendive MT 59330**

**PLEASE PRINT**

Name: \_\_\_\_\_ Spouse: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Religious Affiliation: \_\_\_\_\_

Emergency Contact (Name): \_\_\_\_\_ Phone: \_\_\_\_\_

Special Diet: \_\_\_\_\_

Medical Needs - do you have any medical condition (physical, emotional and/or mental) or any medication that we should be aware of and/or which may affect your ability to fully participate in Cum Christo Renewal Weekend?

(Please note this information will be kept confidential and only provided to program leaders in an effort to promote a safe and healthy environment for all participants. The information will not be disclosed to any others unless it becomes necessary for the purpose of seeking treatment on your behalf.)

List date and location of your Cursillo – Cum Christo – Journey Weekend: \_\_\_\_\_

## HOW ARE YOU LIVING THE FOURTH DAY?

Attending Ultreya: \_\_\_\_\_ Prayer Group: \_\_\_\_\_ Group Reunion: \_\_\_\_\_

Core Group Member: \_\_\_\_\_ Bible Study: \_\_\_\_\_ Faith Sharing: \_\_\_\_\_

Other ministries in which you are active: \_\_\_\_\_

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

**\*Team is to arrive at 1:00 pm on 10/14      \*Candidates are to arrive at 3:00 pm on 10/14**

**There will be time during the weekend for a free will offering to help cover the cost of the weekend.**

**Please mail your Registration Form to: Cum Christo Renewal, Box 112, Glendive, MT 59330**

**Questions? Please call Renee Steinberger (406) 351-2150**

**Big Sky Cum Christo**  
**Diocese of Great Falls-Billings**  
**P.O. Box 1399 Great Falls, MT 59403**

Cum Christo Renewal Weekend: \_\_\_\_\_  
Cum Christo Renewal Weekend: October 14-16, 2022  
Cum Christo Renewal Weekend: Glendive, MT 59330

**CONFIDENTIALITY**

A list of candidates and team names, addresses, phone numbers and e-mails is given to those attending a Cum Christo Renewal Weekend at the end of each weekend. Names, addresses, phone numbers or e-mails are never given to any organization outside of the Cum Christo Renewal Weekend community.

Do you want your information included?      Yes: \_\_\_\_\_      No: \_\_\_\_\_

Applicant Name: \_\_\_\_\_  
(Please Print)

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

**LIABILITY RELEASE**

It is understood and agreed as a condition of being allowed to participate in this Cum Christo Renewal Weekend, I hereby release and hold harmless the Diocese of Great Falls-Billings, its agents and employees for any loss, damage or personal injury that may occur to me while attending this program, unless it is the result of willful or intentionally wrongful misconduct of the Diocese of Great Falls-Billings, its agents or employees.

Applicant Name: \_\_\_\_\_  
(Please Print)

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

*(This signature is **required** by the Diocese of Great Falls- Billings to attend a Cum Christo Renewal Weekend).*