

Application To Attend The Walk-To-Emmaus

Applicant Please type or print clearly. Please complete this side of form, giving all information so that your application can be processed as rapidly as possible. When completed, return this application to your sponsor _____

Last Name First MI preferred first name for nametag

Street _____ City/State/Zip _____

Phone: home (____) _____ work (____) _____ cell (____) _____

Email: _____ Do you check this email regularly? _____

Age _____ birthday: _____

Circle as apply: male female / lay clergy / married single separated divorced widowed

My first choice date is: _____ second choice: _____

Could you attend on short notice of 3 or 4 days? (Circle one) Yes No

Occupation _____ Employed by _____

Spouse's name (if applicable) _____ No. of children _____ ages _____

Name & denomination of church _____

Church address _____ City/State/Zip _____

Pastor's name _____ pastor's phone #(____) _____

Has the walk to Emmaus been explained to you? (Circle one) Yes No

Why do you wish to attend the Walk-to-Emmaus?

Are you on a special diet or do you require special medication? (Circle one) Yes No

Do you have any health problems or physical limitations that may require consideration on this Weekend? (Circle one) Yes No *If yes to either, please explain:*

Please apply only if you can be present for the entire weekend from 7:00 p.m. Thursday through Sunday afternoon closing. The entire cost of the weekend is \$130.00. Enclose a minimum of \$40.00 with this application. The remaining \$90.00 is payable upon arrival Thursday. Please make checks payable to East Texas Emmaus Community. In the event that it becomes necessary for you to cancel, please notify your sponsor or registrar immediately. Each applicant must be sponsored by someone who has attended a walk to Emmaus or related-type weekend. *Note: \$40.00 registration fee is non-refundable.*

Applicant's signature: _____ Date _____

This applicant has my approval: pastor's signature _____

For registrar's use only

Date rec'd _____ Sponsor's form _____ Check # _____ Amount _____

Walk # _____ Acceptance letters sent: _____ Postcard sent _____

Sponsor's Form for the Walk-To-Emmaus

Please type or print clearly, giving all information so your pilgrim's application may be processed as quickly as possible and return with the pilgrim's completed application and \$40 registration fee to:

ETEC
P.O. Box 153013
Lufkin, TX 75915-3013

Your name: _____

Pilgrim's name: _____

Your address: _____ city/state/zip _____

Phone: home (____) _____ work (____) _____ cell (____) _____

email: _____ Do you check this email regularly? _____

Name & denomination of church _____

Church address _____ city/state/zip _____

Your pastor's name _____ phone # (____) _____

Walk/flight attended _____ # _____ date/place _____

(Emmaus, Cursillo, Kairos, Chrysalis, other) (mo. & year / name of community)

Have you attended Sponsorship Training? _____ If so, when? _____

Do you fully understand your responsibilities as a sponsor? _____

Do you meet in a regular reunion group (Circle one) Yes No

Day, place & time of reunion group meeting: _____

How long have you known the applicant? _____ Is applicant a member of your church?

(Circle one) Yes No if not, please give name of applicant's church

Is applicant active in this church? (Circle one) Yes No -- if no, please explain

Is applicant married? (Circle one) Yes No -- if yes, have you discussed Emmaus with his/her Spouse? Yes No --- if no, please explain

Does your applicant have any health or physical needs that may require special consideration on the weekend? (Circle one) Yes No

If yes, please describe _____

To the best of your knowledge, is the applicant under any temporary emotional strain that might reasonably indicate that his/her participation in a weekend should be postponed until a future time? (Circle one) Yes No

Why do you feel that Emmaus is appropriate for this person?

Have you discussed the \$130.00 fee for the weekend with the applicant? (Circle one) Yes No (if not, please do so before submitting this form to avoid any possibility of embarrassment to your applicant.)

What portion of the fee will be paid by: applicant _____ you _____ other _____?

Will applicant need a scholarship? (Circle one) Yes No

(Scholarships may be available up to \$65 - non-refundable registration fee must accompany application.)

Will you bring your applicant to the next gathering? (Circle one) Yes No

What arrangements have you made to locate a convenient reunion group for your new pilgrim?

Sponsor's signature _____ Date _____

***Sponsor: be sure this form is complete and the applicant's pastor has signed the application. ***