

Emmaus: for the renewal of the church of Jesus Christ through the development and renewal of Christian leaders

Greater Findlay Area Emmaus Community

Pilgrim Application

Application for: Men's Walk Women's Walk

Name: _____ Age Range: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: () _____ Work Phone: () _____ E-Mail: _____

Marital Status: M S D W Sep. # of Children _____ Ages: _____

Employer: _____ Occupation: _____

Emergency Contact: Phone: () _____ Name: _____

Has the concept of an *equal commitment* regarding *The Walk to Emmaus* been explained to you and your spouse?

Has your spouse attended a Walk? _____ Has your spouse registered for a walk? _____

The Walk to Emmaus is designed for actively involved Christians in a local church.

Church now attending: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Pastor's Name: _____ Church Phone: () _____

Religious or community organizations in which you are or have been active: _____

The Walk to Emmaus Weekend is a 72 hour commitment. Do you have a health problem or a physical handicap that may affect your participation in the Walk?

If yes, please explain: _____

We strive to provide healthy, nutritious and appealing meals. If you have a medical reason for not eating a regular diet, please indicate (i.e., allergy, diabetic, etc.)

The Walk to Emmaus is for the development of Christian leaders. Has The Walk to Emmaus been explained to you?

Has the post-Walk meetings been explained to you? _____ State briefly why you wish to be involved in The Walk to Emmaus and what you expect from the weekend: _____

Applicant's Signature: _____

Sponsor's name: _____

All of the information requested is necessary for your proper placement in The Walk to Emmaus. Please enclose a \$20.00 deposit. This will be applied toward your total contribution of \$85.00, which partially offsets the expenses of your weekend. Make checks payable to: Greater Area Emmaus and return this form and your deposit to your sponsor.

Preferred spelling of your name on your name tag: _____

(example: Dave instead of David)

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Greater Findlay Area Emmaus Community Sponsor Information Form (To be completed by sponsor and
submitted with Pilgrim Application with Sponsorship Agreement on file.)**

Sponsor Name:		Name of Pilgrim:	
Sponsor's Address:			
City:		State:	Zip Code:
Home Phone: ()	Work Phone: ()	E-Mail:	
Sponsor's activity in their church and the local Emmaus Community			
Sponsor's Church:			
Church Activities:			
Location and Date of your Walk:			
Current Activity in Emmaus Community:			
Date of Last Walk you worked:			
Are you in a Share Group:			
To sponsor a Pilgrim in the Greater Findlay Emmaus Community, you must have a current Sponsorship Agreement on file with our Community. If you do not, please contact our Sponsorship Board Rep. Are you in agreement with our sponsorship policy?			
Have you attended a Sponsorship Workshop? (Starting in 2006 you must have attended a Sponsorship Workshop before you can sponsor a Pilgrim.)			
A good sponsor knows their Pilgrim and understands the importance of follow-up. How many Pilgrims have you sponsored in the last year? How long have you known your candidate?			
If your Pilgrim is married, what is their spouses response to the equal commitment concept?			
What is your relationship to your Pilgrim and why do you feel they are ready to take the Walk to Emmaus?			
Do you understand the concept of The Walk to Emmaus follow-up?		Do you attend Gatherings?	
Will you take this candidate to the Gathering following the Walk?			
During the Walk to Emmaus weekend will you or will you arrange for someone to: Take your candidate to the Emmaus site? Attend Sponsor's Hour? Attend Candlelight? Attend Closing? Participate in the 72 Hour Prayer Vigil? Help care for the needs of the Pilgrim's family?			
Sponsor's Signature:			Date:

APPLICATION DEADLINE IS THURSDAY prior to the WALK.

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