

OWENSBORO WALK TO EMMAUS PILGRIM APPLICATION

THE WALK TO EMMAUS IS AN EXPERIENCE OF CHRISTIAN SPIRITUAL RENEWAL AND FORMATION THAT BEGINS WITH A THREE-DAY SHORT COURSE IN CHRISTIANITY. IT IS AN OPPORTUNITY TO MEET JESUS CHRIST IN A NEW WAY AS GOD'S GRACE AND LOVE IS REVEALED TO YOU THROUGH OTHER BELIEVERS. THE PURPOSE OF THE WALK TO EMMAUS IS TO DEVELOP LEADERS FOR THE CHURCH, THE WALK TO EMMAUS AND THE WORLD.

TO BE COMPLETED BY THE PILGRIM

Name (first and last, as you wish it to appear on nametag):

Male Female

Age:

Marital Status: Single Married Divorced
 Widowed

Email address:

Current address:

City:

State:

ZIP Code:

Phone:

EMPLOYMENT INFORMATION

Current employer:

Position:

CHURCH INFORMATION

Name and denomination of church you currently attend:

Pastor's Name:

How long have you attended here?

Are you an ordained minister?

RELIGIOUS AND COMMUNITY INVOLVEMENT

In what religious and/or community organizations are you active?

WALK TO EMMAUS DETAILS

Are you applying to attend the Spring Walk Fall Walk

Has your sponsor explained to you the Walk to Emmaus – the purpose and the activities of the weekend? Yes No
 Do you have any questions or concerns?

Has your sponsor explained group reunions and the monthly gatherings? Yes No

Do you have a health condition or physical handicap that may affect your attendance at the Walk to Emmaus?
 No Yes If yes, please explain.

(Things to consider: Can you climb/descend 7 – 10 stairs, walk across the street from one building to another and sit for at least 30 minutes?)

Are you on a special diet? No Yes If yes, please explain. Please list any allergies.

Are you on medication? No Yes If yes, will you need reminders to help you stay on track with your medication schedule?

State briefly why you wish to attend the Walk to Emmaus and what you expect from it.

SIGNATURE

Signature of applicant:

Date:

Please return your completed application to your sponsor.

Revised September 2016

OWENSBORO WALK TO EMMAUS SPONSOR APPLICATION

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TO BE COMPLETED BY THE SPONSOR

Name of sponsor:

Email address:

Phone number:

Current address:

CHURCH INFORMATION

Name and denomination of church you currently attend:

Pastor's Name:

How long have you attended here?

Do you attend regularly? Yes No

WALK TO EMMAUS DETAILS

When (date/walk#) and in what community did you make your Walk/Chrysalis/Cursillo?

Are you now in a reunion group/Emmaus group? Yes No

PILGRIM INFORMATION

Name of pilgrim you wish to sponsor:

How long have you known the pilgrim?

Why do you think this person would be a good pilgrim?

Does the pilgrim have the physical and mental health needed for the weekend? Yes No If no, please explain:

Is the pilgrim under any temporary emotional strain that might indicate his/her weekend should be postponed? No Yes
If yes, please explain:

If the pilgrim is married, have you discussed the Walk to Emmaus with the spouse? Yes No
What is the spouse's response?

SPONSOR'S RESPONSIBILITIES

Have you explained the Walk to Emmaus, reunion groups and gatherings to him/her? Yes No
If no, please explain:

Are you able and willing to assist your pilgrim in becoming part of an Emmaus reunion group? Yes No

Will you bring your pilgrim to the Emmaus site on Thursday night? Yes No

Will you attend Sponsor's Hour? Yes No Candlelight? Yes No Closing? Yes No

Can you care for the needs of the pilgrim's spouse/family during the weekend? Yes No

Are you aware of the importance of minimal contact with your pilgrim during the weekend, especially if that pilgrim is your spouse? Yes No

Do you understand that no gifts of any kind will be allowed to be given to your pilgrim during the Walk? Yes No

SIGNATURE

Signature of sponsor:

Date:

Send completed Pilgrim and Sponsor applications, along with a \$10.00 non-refundable deposit, to:

Owensboro Emmaus Community
Registrar
PO Box 1621
Owensboro KY 42302

The remaining balance of \$50.00 will
be due at check-in Thursday night.