



APPLICATION TO ATTEND A
SOUTHSIDE VIRGINIA WALK TO EMMAUS
(Please PRINT LEGIBLY or TYPE)



Name: _____ Name you wish to be called: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Best Phone # to call: _____ [] Home [] Cell [] Work

Occupation _____ Sex: M [] / F [] Age: _____ Birth date (m/d/y): _____

Marital Status: [] married [] single [] divorced [] widowed Spouse's name _____

Has your spouse attended an Emmaus/Cursillo Weekend? Yes [] No []

If yes, when _____ where _____

Ordained/Licensed Minister: [] Yes / [] No

Church you attend: _____ Pastor's Name _____

Address: _____

City: _____ State: _____ Zip: _____

Church organizations/activities: _____

List any musical instruments you play: _____ (Bring it with you.)

PHYSICAL/MEDICAL NEEDS

Your Emmaus experience will involve walking (indoors/outdoors), climbing stairs, and periods of sitting.

Assistance is needed with _____ wheelchair _____ walker _____ other device (specify) _____

List any physical handicaps/limitations that may affect your participation in the weekend:

List any medications you take on a daily basis: _____

Specify any special dietary needs: _____

List food allergies: _____

Briefly state why you wish to attend an EMMAUS weekend and what you expect to gain from it.

IN CASE OF EMERGENCY NOTIFY: _____ PHONE: _____

This form serves as an application only. Since there may be a waiting list, notification of your acceptance for a weekend will be made by phone and mail. A non-refundable deposit of \$50.00 must accompany this application. THERE ARE NO ADDITIONAL COSTS TO YOU FOR YOUR WEEKEND. Make check payable to SOUTHSIDE EMMAUS. After you have completed this application, please return it along with your check to your sponsor.

Your name and the name of your church may appear in the Emmaus Newsletter and/or on the Emmaus Website. Your permission allowing us to do this is requested: Yes []/ No []

(Signature of Applicant) _____ / _____
Date

(Signature of Sponsor) _____ / _____
Date

SPONSORSHIP

PLEASE READ THE FOLLOWING STATEMENT CAREFULLY
AND GIVE IT PRAYERFUL CONSIDERATION.

Emmaus is a method of Christian renewal in the church. Individuals recommended for Emmaus should be currently active in a local church. They should have a desire to deepen their faith and understanding of God's love and to become closer to Christ in their discipleship. Emmaus is meant for enrichment and development of Christian leaders, not recruitment. As a sponsor, you are required to provide information to the applicant to assist him/her in the decision to attend a weekend, to help him/her to enter fully into the Emmaus fellowship after the weekend, to provide prayer and other support (including financial—if financial help is needed please contact the weekend Lay Director or the Community Lay Director), and to provide transportation to and from the Emmaus weekend.

TO BE COMPLETED BY SPONSOR: Write legibly or type

Pilgrim's name _____

Sponsor's name _____

Sponsor's address _____

City _____ State _____ Zip code _____

Sponsor's Phone (_____) _____ Email _____

Sponsor's Church _____

When did you attend your Weekend? _____ Where? _____

Have you attended a Day of Deeper Understanding? Yes / No

Do you belong to a Reunion Group? Yes / No Do you attend regular gatherings? Yes / No

How many pilgrims have you sponsored in the past two years? _____

(Note: After a third invitation has been declined, a pilgrim must reapply.)

Sponsor's Signature _____

Mail Completed Application and \$50.00 Deposit To:
Southside Virginia Emmaus
C/O Mike Hedgepeth
50 Franklin Street
Roanoke Rapids, NC 27870

FOR ADMINISTRATIVE USE ONLY:

Date Application Received _____ Deposit Received from: _____

Date _____ Amt. _____ Check # _____

Date of and response to first invitation: _____

Date of and response to second invitation: _____

Date of and response to third invitation: _____