

# MEMPHIS WALK TO EMMAUS APPLICATION

Asg Letter: \_\_\_\_\_ DB Record: \_\_\_\_\_

Conf Letter: \_\_\_\_\_ Walk: \_\_\_\_\_

Revised: 08/30/09

## APPLICANT INFORMATION

One Application Per Person

This is only an application. Notification of your assigned weekend will be made by mail. After you have completed your part of this application, please give it to your sponsor. All information will be kept confidential.

----- ***Incomplete applications cannot be processed.*** -----

Please print clearly

Name \_\_\_\_\_ Name you wish on your name tag \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Home Ph (\_\_\_\_) \_\_\_\_\_ Bus Ph (\_\_\_\_) \_\_\_\_\_ Cell Ph (\_\_\_\_) \_\_\_\_\_

Age \_\_\_\_\_ Marital Status \_\_\_\_\_ E-mail \_\_\_\_\_

Your Church \_\_\_\_\_ Member \_\_\_\_\_ Visiting \_\_\_\_\_

Occupation \_\_\_\_\_ Spouse Name \_\_\_\_\_

Is your spouse applying to attend the "adjacent" walk? \_\_\_\_\_ Has your spouse already attended a walk? \_\_\_\_\_

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

## MEMPHIS WALK TO EMMAUS WEEKEND DATES

Men's ( ) February \_\_,20\_\_

Please verify dates of Walk at

Men's ( ) October \_\_,20\_\_

Women's ( ) February \_\_,20\_\_

[www.Memphisemmaus.com](http://www.Memphisemmaus.com)

Women's ( ) October \_\_,20\_\_

Check these dates carefully, then mark the weekends of your choice with a (1) and a (2) for your first and second choices. Married couples should attend consecutive weekends. If you cancel less than 10 days prior to your assigned walk, it may be necessary to re-apply.

## MEDICAL INFORMATION / SPECIAL NEEDS

Please list any special needs or concerns such as medical allergies, medications taken, medical problems, dietary needs, food allergies, or other pertinent information \_\_\_\_\_

Name of a relative not living with you \_\_\_\_\_

Relationship \_\_\_\_\_ Ph (\_\_\_\_) \_\_\_\_\_

## APPLICANT'S PASTOR INFORMATION

Pastor Name \_\_\_\_\_ Church \_\_\_\_\_

## SPONSOR INFORMATION

EMMAUS is a method of Christian renewal in the church. Individuals recommended for Emmaus should be currently active in a local church and have a desire to deepen their faith and become closer to Christ in their discipleship. 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 enter fully into the Emmaus fellowship after the weekend, to provide prayer and other support, and to provide transportation to Send-Off and from Closing. Please be sure to encourage BOTH husband and wife to attend Emmaus. As a sponsor, your signature is a covenant to a vital responsibility as a member of the Emmaus Community.

Sponsor Name \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Home Ph (\_\_\_\_) \_\_\_\_\_ Bus Ph (\_\_\_\_) \_\_\_\_\_ Cell Ph (\_\_\_\_) \_\_\_\_\_

Your Church \_\_\_\_\_ Member \_\_\_\_\_ Visiting \_\_\_\_\_

E-mail \_\_\_\_\_ Emmaus Walk you attended \_\_\_\_\_

Is this the first time you have sponsored in the Memphis Emmaus Community - Yes No (Circle One)

## COMPLETED APPLICATIONS

Please check one:

\_\_\_\_ \$50.00 Deposit enclosed (\$100.00 due at Send-Off)

\_\_\_\_ \$150.00 Registration Fee enclosed

Deposit or full Registration Fee must be included for application to be accepted

Memphis Emmaus Community web site--

SPONSOR - Mail completed application to:

Memphis Emmaus Registration

P.O. Box 240414

Memphis, TN 38124

<http://www.memphisemmaus.com>