

WEST TENNESSEE EMMAUS COMMUNITY PILGRIM APPLICATION FORM



The West Tennessee Emmaus Community is delighted you are seeking to participate in the Walk to Emmaus. Emmaus is for active Christians who are members of churches whose own renewal will mean new energy, commitment and vision in their church and everyday interactions, for Christ's sake.

Sponsor's Name: _____ Date of Application _____

TO BE COMPLETED BY APPLICANT:

Pilgrim's Name: _____ Name for name tag: _____

Church Membership (name of church): _____ For how long? _____

Would you consider yourself an active member of your church? Please explain.

Pastor's Name: _____ Date of Birth: _____ Sex: M / F

Circle One: Married Divorced Widowed Single Separated

If married, have you and your spouse both committed to go on the Walk to Emmaus? Y / N If no, please explain: _____

How long have you known your sponsor? _____

Has your sponsor explained what will happen over the weekend and answered all questions you have? Y / N

If no, what has your sponsor explained to you about the weekend? _____

| | | | |
|---|-------|--|-------|
| Did your sponsor talk with you about Reunion Groups? | Y / N | Has your sponsor pledged to attend Closing? | Y / N |
| Is your sponsor part of a Reunion Group? | Y / N | Has your sponsor been praying for you? | Y / N |
| Has your sponsor pledged to support you during the weekend? | Y / N | Has your sponsor pledged to bring you to Send-Off? | Y / N |

Do you have health issues or a disability that may hamper you during the weekend? Y / N

(Moderate walking and a small amount of stair climbing are necessary)

If yes, please explain. _____

Are you on medication? _____ Are you on a special diet? Y / N

(Please list needs): _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Business Phone _____

E-Mail Address _____

What is your present occupation? _____

What is the name of your employer? _____

Name and Phone # of emergency contact other than spouse _____

IN THE SPACE BELOW, PLEASE STATE BRIEFLY WHY YOU WISH TO BE INVOLVED IN THE WEST TENNESSEE EMMAUS COMMUNITY AND WHAT YOU EXPECT TO RECEIVE FROM IT:

Signature _____ **Date** _____

All the above information is necessary for your acceptance as a pilgrim and proper placement in the Walk to Emmaus.

- **Please answer all questions.**
- **This application should be returned to your sponsor.**
- **Please enclose a deposit of \$20.00 made payable to West Tennessee Emmaus Community. This will be applied toward your contribution of \$100.00, which partially offsets the expenses of the weekend.**

PLEASE NOTE: SUBMITTING AN APPLICATION DOES NOT GUARANTEE A RESERVATION. You and your sponsor will be notified when you have been accepted for a particular Walk.