

Shenandoah Valley Emmaus Community Pilgrim Application



WALK TO
EMMAUS
THE UPPER ROOM®

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Revised: 4/19

TO BE COMPLETED BY APPLICANT
- FILL IN BEFORE PRINTING FOR PASTOR SIGNATURE

Name: _____

Today's Date: _____

Preferred Name for Name Badge: _____

Mailing Address: _____

City/State/Zip: _____

Home Phone: _____ Work/School: _____ Cell: _____

Email Address: _____

>>> NOTE: if you provide an email address, SVEC will contact you primarily by email. Check your email regularly. <<<

Age: _____ Date of Birth: _____ Gender: M F

\$40 Application Fee Submitted. >> FEE MUST BE PAID BY APPLICANT BEFORE THE APPLICATION IS PROCESSED. <<

Occupation: _____ Work City: _____

Marital status: Single Married Separated Divorced Widow/Widower

Spouse name: _____ Spouse attended Emmaus/Cursillo? Y N

Has your spouse submitted an application to attend a Walk? Y N

List any other family members who reside with you: _____

Do you require any physical assistance to attend? N or Explain: _____

List any important food allergies/restrictions that may require special attention by Food Service:

List any other health problems that may affect your attendance: _____

List any medications and times to be taken other than at meal time, bedtime or waking up : _____

What faith community are you active in? Church Name: _____

Denomination: _____ City: _____ State: _____

Your Pastor: _____ Pastor's Signature: _____

>> PASTOR SIGNATURE IS REQUIRED <<

Your Sponsor: _____

How did you learn about the Walk to Emmaus? _____

Briefly state why you wish to attend an Emmaus Weekend, what you expect from it, or anything else

you would care to share: _____

**This may also be completed online at shenandoahvalleyemmaus.weebly.com/pilgrim-applicaton.html & fee paid by Credit Card
Return the completed application and the \$40 APPLICATION FEE to your sponsor. [Keep a copy for your records.]**

>> If you have not received an acknowledgement within 3 weeks of submission (or 10 days before the expected Walk date), contact your sponsor.

SPONSORSHIP AGREEMENT

SPONSORS: READ THE FOLLOWING STATEMENT CAREFULLY, AND GIVE IT YOUR PRAYERFUL CONSIDERATION:

The Emmaus Walk is a method of Christian renewal in the church. Individuals recommended for Emmaus should be those with an active desire to deepen their faith and understanding of God's love and to become closer to Christ in their daily lives and discipleship. A sponsor agrees to provide information to the applicant and to the applicant's family, to assist him/her in the Emmaus fellowship, and to provide transportation to and from the Emmaus weekend.

TO BE COMPLETED BY SPONSOR:

This form & payment may also be completed at

shenandoahvalleyemmaus.weebly.com/online-sponsors-form.html

PILGRIM Name: _____

Sponsor's Name: _____ Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-mail: _____

Address: _____

City: _____ State: _____ ZIP: _____

Name/Denomination of the Church you attend: _____

Church City: _____ State: _____

When/where did you take your Walk? When: _____ Where: _____

Was it [] Emmaus, [] Cursillo, [] Chrysalis, or [] other? _____

Have you:

1) Attended a Sponsor Training Event? Y [] N [] Where and when: _____

2) Have you read and do you agree to fulfill duties outlined in the SVEC Sponsor Responsibilities list? Y [] N []

Please share any information about this pilgrim which may affect their weekend experience. (emotional needs, physical needs, anything that would help the LD and team with groupings and sharing, etc.) _____

Briefly explain why you wish to sponsor this pilgrim:

Sponsor's Signature: _____ Date: _____

SPONSOR: PLEASE KEEP A COPY OF YOUR PILGRIM'S APPLICATION FOR FUTURE REFERENCE

- 1. Send the PILGRIM'S APPLICATION (with its \$40 deposit) and
- 2. Your SPONSOR AGREEMENT (with the \$130 REGISTRATION FEE)

TO:

**Shenandoah Valley Emmaus Community (SVEC)
c/o Tim Armentrout
57 Hamshire Way
Fishersville, VA 22939-2140**

FOR COMPLETION BY SVEC:

Date application received: ____/____/____ Date accepted ____/____/____

Spouse application received ____/____/____ or [] N/A

Fees received:

Registration \$ _____ CK No _____

Sponsor \$ _____ CK No _____

Scholarship \$ _____