

## Application to Attend an Emmaus Weekend

Please note a first and second choice of Walks you would be able to attend:

**2008**

Hermit Basin \$175 .00

\_\_\_ 10/23 – 10/26 Men

\_\_\_ 10/30 – 11/02 Women

The Abbey \$190.00

\_\_\_ 06/19 – 06/22 Men

\_\_\_ 06/26 – 06/29 Women

Name: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_ Zip: \_\_\_\_\_ e-mail \_\_\_\_\_

Are you an Ordained Clergy? Y N (If yes -Denomination \_\_\_\_\_)

Are you a Local Pastor / Licensed Lay Pastor? Y N (If yes -Denomination \_\_\_\_\_)

Birth Date: \_\_\_\_\_

Name you want on name tag \_\_\_\_\_ Marital Status: \_\_\_\_\_

Spouse's Name \_\_\_\_\_ Number of children: \_\_\_\_\_

Ages: \_\_\_\_\_ Church you attend: \_\_\_\_\_

Denomination \_\_\_\_\_ Church Address: \_\_\_\_\_

City: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ Minister: \_\_\_\_\_

Do you have a health condition and/or physical handicap / limitation that we need to consider in assisting you to fully experience the weekend? \_\_\_\_\_

Are you on a special diet or medications? (Specify) \_\_\_\_\_

Closest friend / relative not living with you ( and not your sponsor):

Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Address: \_\_\_\_\_

Work Phone: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please give a frank statement about why you would like to attend an Emmaus Weekend, what you expect from it and anything about yourself and your faith you wish to share:

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### TO BE FILLED OUT BY PASTOR

I confirm that \_\_\_\_\_ is an active participant in our church program. I recommend this person as a candidate. (If you have questions about Emmaus, please email the registrar at [eotrregistrar@hotmail.com](mailto:eotrregistrar@hotmail.com).)

*Pastor's Signature* \_\_\_\_\_

Because Walk to Emmaus is a short course in Christianity to deepen your knowledge of God's grace active in our lives, belief in Jesus Christ as the Son of God is a prerequisite. The Emmaus Weekend runs from Thursday evening through Sunday evening, and encourages a lifetime of continued community after the weekend. Married couples are *strongly* encouraged to make a joint commitment. Notification of your acceptance for the weekend will be made by phone or mail as soon as possible after receipt of application. After you have completed this form, please give it back to your sponsor. A minimum deposit of \$25.00 with submittal of application is required to place a pilgrim on the Walk list. Full tuition is expected to be paid at least 30 days prior to the Walk. The tuition will be refunded for cancellations made 30 days prior to the weekend. Cancellations made less than 30 days prior to the Walk will be forwarded to the next walk. Please make

checks payable to "Emmaus of the Rockies".

## Sponsorship

**Important !!!** The Walk to Emmaus is not an evangelistic tool or a place to solve deep emotional problems. "If the Walk to Emmaus is looked upon as a hospital where every human ill can be cured, it will have a weakening effect on the entire community" (taken from Day Four, the Pilgrim's Continued Journey, Upper Room, Nashville.) Emmaus is a method of Christian renewal in the church. Individuals recommended for Emmaus **should be currently active in a local church and believe that Jesus Christ is the Son of God**. They should have a desire to deepen their faith and to become closer to Christ in their Discipleship. As a Sponsor, you are **required** to discuss the weekend with the applicant's spouse and secure his/her application to attend a Walk or their support for the applicant's participation in the Walk to Emmaus. The sponsor is also 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, and **to insure transportation to and from the Emmaus weekend**. It is the Sponsor's responsibility to make the applicant aware of the cost of the weekend and the type of financial arrangements that can be made. **A minimum deposit of \$25.00 with submittal of application is required to place a pilgrim on the Walk list. Full tuition is expected to be paid at least 30 days prior to the Walk.** Sites and costs for the upcoming weekends are listed on the front of this application. Please have your pilgrim select 1st and 2nd choices. Incomplete applications will be returned to the sponsor, so please be sure to fill this out completely to insure their space.

### To Be Completed By the Sponsor

Pilgrim to be Sponsored: \_\_\_\_\_

Sponsor's Name: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_ e-mail \_\_\_\_\_

Home Church: \_\_\_\_\_ Denomination \_\_\_\_\_

Where and when did you make you Emmaus / Cursillo / Chrysalis weekend?

Has the pilgrim's spouse been on a Walk already \_\_\_\_\_ Date, if known \_\_\_\_\_

Have you discussed the weekend with the pilgrim's spouse? \_\_\_\_\_

Has the pilgrim's spouse submitted an application? \_\_\_\_\_

**If not, why?** \_\_\_\_\_

Can you help with the needs of the pilgrim's spouse during the weekend? \_\_\_\_\_

Are you working on the Emmaus Team for this weekend? \_\_\_\_ Are you in the conference room? \_\_\_\_

Remember: You are responsible for getting your candidate to the weekend. They should not drive themselves.

Signature

Date

Mail to:

Registrar – Emmaus of the Rockies

P. O. Box 1416  
Canon City, CO 81215-1416

Pilgrim Name: \_\_\_\_\_