

Lake Cumberland Area WALK TO EMMAUS
PILGRIM APPLICATION

Please Print Clearly

APPLICANT INFORMATION

One Application per Person

NOTE: This is only an application. Notification of your assigned weekend will be made by mail or by e-mail. After you have completed your part of this application, please give it to your sponsor. All information will be kept confidential. Incomplete applications will be returned. Placement will be made based upon date received, availability of space and discretion of the Emmaus board. Please list an address & number where you can be reached.

Name (as you wish printed on your name button) _____

Mailing Address _____ City _____ St _____ Zip _____

Phone (____) _____ Date of Birth _____ Marital Status _____ Gender M or F

E-mail _____ Your Occupation _____

Your Church _____ Member Visiting Pastor's Name _____

If applicable: Spouse Name _____ Spouse Cell # (____) _____

Is your spouse applying to attend the "adjacent" walk? Yes / No

Has your spouse already attended a walk? Yes / No

Lake Cumberland Area Emmaus WALK TO EMMAUS

Men's Walk Spring / Fall

Women's Walk Spring / Fall

Check either Men or Women walk. Then, circle Spring or Fall. Married couples are encouraged to attend consecutive weekends if possible. If you cancel less than 10 days prior to your assigned walk, it will be necessary to re-apply unless you request that your application be transferred to the next walk.

MEDICAL INFORMATION / SPECIAL NEEDS

Please list any physical limitations or restrictions that we would need to know about.

Do you take any medications? Yes / No

List: _____

Diagnosed food allergies or special dietary needs? Please list for the kitchen _____

Personal Reflection

Why do you wish to attend this walk? What do you hope to receive? _____

Emergency Contact - OTHER THAN SPONSOR or SPOUSE

Name _____

Relationship _____ Phone (____) _____

APPLICANT'S SIGNATURE

Applicant Signature _____ Date _____

COMPLETED APPLICATIONS

You must be sponsored on your Walk by someone who has completed a Walk to Emmaus, Chrysalis, or similar weekend. After you have completed this application, please give it to your sponsor.

YOUR SPONSOR MUST COMPLETE AND SIGN THE REVERSE SIDE OF THIS FORM.

Updated August 2022

Please check one:

- \$110.00 enclosed (paid in full)
- \$30.00 enclosed (required with application to hold spot).

NOTE: Sponsor balance of \$90.00 due at registration prior to Send-Off.

SPONSOR: Mail completed application to:

Kayla Glover
775 Mount Moriah Rd
Summer Shade, KY 42166

Questions? Call or text (270) 670-5215

TO BE COMPLETED BY SPONSOR - ALL blanks MUST be completed

Please Print Clearly

Sponsor's Name _____

Street Address / City _____ State _____ Zip _____

List numbers that you can be reached at: Phone (____) _____ Cell Phone (____) _____

E-mail Address _____

Name and location of Church you are now attending: _____

Your Pastor's name: _____

Do you attend regularly? Yes No

Where did you attend your Walk to Emmaus _____

Your Walk # _____

Please verify the following statements are true by placing a check in each box preceding the statement.

- If applicable. I have discussed the walk with my pilgrim's spouse.
- I believe the candidate has the physical/mental health needed for an Emmaus Walk.
- I am praying for my pilgrim.
- I have explained the Emmaus Walk to my pilgrim.
- I understand that I am to bring my pilgrim to the location of walk on Thursday for sendoff at 6:00 pm EST.
- I will assist my pilgrim's family while he/she is on the walk.
- I will attend candlelight service.
- I will gather agape letters.
- I will attend closing service.
- I will accompany my pilgrim to the follow-up service following my pilgrim's walk.
- I will assist my pilgrim in getting established into a reunion group after the walk.

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 and from the camp. 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 Signature _____ Date: _____

Pilgrim Name _____