

Lagniappe Country Walk to Emmaus

PILGRIM APPLICATION

PLEASE TYPE OR PRINT CLEARLY

Men's Walk Women's Walk Lay Clergy Date _____

Name (Last, First, Initial) _____ Nametag name? _____

Sponsor name _____ Sponsor phone # (____) _____

Your Address _____ Your Home phone # (____) _____

City _____ State _____ Zip _____ Your Cell phone # (____) _____

Personal Email Address: _____ Age _____

Marital Status: Married Single Divorced Widowed Separated Spouse's Name _____

My spouse (*check one*) will attend. will not attend. has attended Walk # _____
(Emmaus encourages equal commitment of husband and wife to attend if possible)

Name and denomination of church in which you are **actively** participating (*you MUST be actively involved in a church*) _____

Pastor's Name _____

Emergency Contact (in addition to spouse): _____ Phone Number: (____) _____

Has the Walk to Emmaus been explained to you, including post-Emmaus follow-up? Yes No

Do you have any special dietary requirements or restrictions? Yes No (*If so, please list with reason.*) _____

Do you have vision impairment? Yes No. Hearing impairment? Yes No. (Please list any vision or hearing accommodation needed.) _____

Do you have other health problems or physical limitations that we should be aware of for the weekend? (*If yes, please specify.*) Yes No _____

Are you on prescription medication? If so, what? Yes No _____

State briefly why you wish to attend the Walk to Emmaus. _____

I understand that I need to be present the entire weekend, from 6pm Thursday until 6pm Sunday.

Signature _____ Date _____

Please enclose a non-refundable, pre-registration **deposit of \$25.00**. This will be applied toward your contribution of **\$110.00** for the entire weekend. Make checks payable to Lagniappe Country Walk to Emmaus. Your sponsor will mail your check and application to the registrar.

Before mailing: Please check the pilgrim and sponsor forms for all required information. BOTH FORMS MUST BE SUBMITTED TOGETHER. This application will be returned if both forms not completely filled out, or if registration fee is not enclosed.

Revised 05/2017

Registrar's Use Only

Date application received: _____ Cash Check# _____ Amount _____

Called for Walk# _____ Participated in Walk# _____ Dates _____

SPONSOR'S APPLICATION

PLEASE TYPE OR PRINT CLEARLY

Pilgrim's Name _____

Sponsor's name _____ Sponsor's phone # (____) _____

Email address _____ Work Phone # (____) _____

Address _____ Home phone # (____) _____

City _____ State _____ Zip _____

Your Emmaus/Cursillo? _____ # _____ When? _____ Where? _____

Name and denomination of church you attend. _____

If the candidate is married, you are strongly encouraged to discuss the Walk to Emmaus with the spouse before you submit this application, since attending an Emmaus weekend can have a significant impact on a couple's relationship.

Have you discussed Emmaus with the spouse? Yes No. Are there issues involving the spouse's attendance that we should be aware of? Yes No _____

How long have you known the candidate? _____ Have you been praying for your candidate? Yes No

Are you aware of your Pilgrim's commitment to Christ through active participation in a local church? Yes No

What characteristics do you feel your candidate exhibits to show their commitment to Christ? _____

Does the candidate have any physical health needs we should be aware of for the weekend? Yes No (If so, please list.) _____

Is the candidate under any temporary emotional strain? Yes No
(If so, it might be wise to consider postponing their attendance until a future walk)

Will you bring your candidate to the Emmaus site for Send Off Thursday evening? Yes No

Will you support your pilgrim's family during the weekend, assisting them in any way needed to insure that your pilgrim's attending the Emmaus weekend will NOT pose a hardship upon their family? Yes No

Are you aware of and committed to the importance of minimal contact with your candidate during the entire weekend, even if the candidate is a close acquaintance? Yes No

Will you bring your candidate to the Fourth Day Gathering and help them get into a Reunion Group? Yes No

Review your commitment as a sponsor before signing

SEEK prayerful guidance before asking applicant to attend.
HELP resolve any problems that might prevent attendance.
SUPPORT the applicant's family during his/her absence.
ESCORT the new pilgrim to the post-weekend meeting.
PERSEVERE in helping your pilgrim get into a Group Reunion.

ANSWER all questions and concerns honestly and candidly.
BRING applicant on time on Thursday evening.
DRIVE or ride home with your pilgrim after the weekend.
TAKE your pilgrim to the next Gathering after the weekend.
TEACH your pilgrim about responsible sponsorship by example.

As a sponsor I say YES to Christ, that I will fulfill my responsibilities as a sponsor in such a way that His grace and love are revealed to this candidate through my Christian action. My signature on this application indicates my endorsement of this candidate for the Walk to Emmaus weekend, and my commitment to the high calling of responsible sponsorship.

Sponsor's Signature _____ Date _____

Please send completed application and deposit to:

**Lagniappe Country Walk to Emmaus
P.O. Box 83662
Baton Rouge, LA 70884**

Please feel free to copy this application as needed.

Revised 05/2017