

Applicant: Please print clearly and fill in all blanks to avoid delay. Fee: \$250 Please enclose a check for the full amount to Sunrise Emmaus. Your payment will be deposited upon receipt but is refundable upon written request. In the event you must cancel, please notify the Emmaus Registrar and your sponsor immediately. Please have your pastor or clergy sign this form. Once all information is complete, please give this form along with your check to your sponsor who will make sure the registrar receive s it.

List the Walk No. _____ [] Women's [] Men's Date: _____
NAME _____ PREFERRED NAME _____
PHONE (____) _____ WORK or ALT. PHONE (____) _____
ADDRESS _____ CITY/ST/ZIP _____
AGE _____ BIRTHDAY(m/d) _____ MARITAL STATUS: S M D W PREFER NOT TO SAY
EMAIL _____ DO YOU SNORE? Y N ABLE TO CLIMB STAIRS? Y N

Are you on a special diet? Y N If yes, please describe _____
If you are on special medication, have a health problem, or a physical handicap, which may affect your attendance at a Walk to Emmaus, please specify _____

SPOUSE'S NAME _____ CONTACT# (____) _____
EMAIL _____ Has spouse attended a walk? Y N Registered for a walk? Y N

If your spouse has been on or registered for a walk, please give the name of the community and walk number (if you do not know, leave blank). _____

NAME OF SPONSOR _____ PHONE (____) _____
ADDRESS (include city) _____ EMAIL _____

SPONSOR SIGNATURE: _____

PASTOR'S NAME _____ PHONE (____) _____
CHURCH YOU ATTEND _____ DENOMINATION _____
ADDRESS(include city) _____ PHONE (____) _____

PASTOR or CLERGY: I am familiar with the Walk to Emmaus or have been informed of its intent and purpose, believe the person named as a candidate for a walk in this request for reservation be accepted.

PASTOR'S SIGNATURE: _____ DATE: _____

***The Walk to Emmaus has been explained to me, including the need to be present the entire weekend and post Walk follow-up. I request that I be assigned to a walk. APPLICANT SIGNATURE: _____ DATE: _____**

SPONSOR INFORMATION - to be filled out by sponsor

When & Where Did You Attend Your Walk? _____ Walk #'s _____

Are you in an Accountability (reunion) group? Y N

If yes, what is the Name and do you attend regularly _____

How long have you known the applicant? _____ Why do you feel this person is a good candidate for a Walk to Emmaus? _____

If applicant is married, have you discussed Emmaus with their spouse? Y N Can you care for the needs of your applicant's family over the weekend? Y N Are you aware of the importance of minimal contact with the applicant during the weekend, especially if the applicant is your spouse? Y N Have you told the applicant that phone calls are not allowed? Y N

SPONSOR: I have attended sponsor training and understand the purpose and intent of the Walk to Emmaus and believe that the applicant in this Request for Reservation meets the guidelines as set forth there in (the purpose and intent of the Walk to Emmaus, and the guidelines for attending a Walk, are described in chapters 7 and 8 of the Day Four Booklet). I also understand my responsibilities to this pilgrim before, during, and after the Walk to Emmaus weekend.

SPONSOR'S TRAINING GIVEN BY: _____ SIGNATURE: _____ DATE: _____

INSTRUCTIONS FOR SUBMISSION Please carefully check this form and be sure that all information that is asked for is furnished including signatures of Sponsor, Applicant, and the Applicant's Pastor. Checks should be made payable to Sunrise Emmaus. The application will not be processed until ALL signatures and FULL payment is received. If you are having problems with this or any other form or have questions about the form, email or call the Registrar or a Sunrise Emmaus Representative.