

Official Use Only:

SUNRISE EMMAUS Walk to Emmaus

REVISED 12/11/15

Paid _____ Check

Request for Reservation

No. _____

Applicant: Please print clearly and fill in all blanks to avoid delay. Fee: \$215

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 ADDRESS _____ DO YOU SNORE? 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: _____

Print all information legibly to avoid delay in your application process. Please enclose a check for the full amount (\$215) to Sunrise Emmaus. Your payment will be deposited upon receipt but is refundable upon written request. In the even that 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 receives it.

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

SIGNATURE _____ DATE _____

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, and believe that the person named as a candidate for a walk in this request for reservation be accepted.

PASTOR'S SIGNATURE: _____

SPONSOR INFORMATION - to be filled out by sponsor

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

Are you in an Accountability(reunion group)? YES _____ NO _____

If So 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? YES _____ NO _____

Can you care for the needs of your applicant's family over the weekend? YES _____ NO _____

Are you aware of the importance of minimal contact with the applicant during the weekend, especially if the applicant is your spouse? YES ___ NO ___

Have you told the applicant that phone calls are not allowed? YES _____ NO _____

SPONSOR: 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 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. I also understand my responsibilities to this pilgrim before, during, and after the Walk to Emmaus weekend.

Signature: _____ Date: _____

INSTRUCTIONS FOR SUBMISSION

Please carefully check this form and be sure that all information that is asked for is furnished. Please be sure to see that the Sponsor, Applicant, and the Applicant's pastor have signed where requested on the form. It is necessary that funds for the total amount of the registration fee accompany both signature pages. Without payment, registration will not be complete. Checks should be made payable to Sunrise Emmaus Community.

The application will not be processed until ALL signatures and payment is received.

If you are having problems with this or any other form email or call a Sunrise Emmaus Representative. If you have questions about the form please email the registrar