

**NORTHERN MICHIGAN EMMAUS
WALK TO EMMAUS**

"For the Development of Christian Leaders"

PILGRIM APPLICATION

Emmaus Registrar use only	
Date received _____	
Amt. paid _____	Due _____
Check # _____	
Name on check _____	

1. This form is to be completely filled out by the pilgrim.
2. Please type or print legibly, filling in all information.
3. Give this form to your sponsor who will submit it to the Northern Michigan Emmaus registrar.
4. All information requested is necessary for placement and will remain confidential.

Last Name _____ First name _____ For name tag _____

Address _____ City _____ State _____ Zip _____

E-Mail _____ Home phone _____ Cell _____

Age _____ Birth date (mm/dd/yy) _____ Marital status: single married divorced widowed

Occupation _____ Spouse Name _____

Sponsor's name _____

In case of emergency, whom should we contact?

Name _____ Phone number _____

Current church home _____ Denomination _____

Address _____ City _____ State _____ Zip _____

Pastor's name _____

Please answer the following questions? (Use additional sheet, if necessary)	Yes	No	N/A
Has the Walk to Emmaus weekend been explained to you and your spouse?			
Do you need more information?			
Have Emmaus follow-up activities like Reunion Groups and Gatherings been explained to you?			
Has your spouse been on a Walk to Emmaus? If so, walk # _____ Location _____			
Does your spouse plan to go on a Walk to Emmaus? If so, when? _____			
Do you have a relationship with Jesus Christ?			
Are you willing to dedicate a complete 72 hours to the Walk to Emmaus?			
Are you on a special diet? (If so, please explain.)			
Do you have any food allergies? (If so, please explain.)			
Are you taking any medication? (If so, please explain.)			
Do you have health or physical challenges that would affect your participation in the Walk to Emmaus? (If so, please explain)			

I understand that this is a request for reservation and that receipt of this application does not guarantee me a spot on the Northern Michigan Emmaus Walk to Emmaus.

I further understand that the "Walk To Emmaus" is an opportunity for active Christians to sit at Jesus' feet for 72 hours. To that end, I will plan to be at the walk site from 6 p.m. on Thursday until 6 p.m. on Sunday. I will leave all diversions such as cell phones, watches, and hobby materials at home. In humility and dependence on God, I will be cooperative, teachable, and loving to all others whom I encounter on the Walk to Emmaus.

Signature _____

Please return this form to you sponsor with a pre-registration deposit of \$20.00 which will be applied to the total fee of \$85.00. The balance of the fee may be paid to the registrar on Thursday of your Walk at check-in or any time before the Walk.

NORTHERN MICHIGAN EMMAUS SPONSOR'S RECOMMENDATION AND COMMITMENT FORM

MAIL THIS FORM WITH PILGRIM'S APPLICATION AND \$20.00 DEPOSIT TO:

**Men's Walk or Women's Walk
Northern Michigan Emmaus
P.O. Box 984
Gaylord, MI 49734**

1. This form is to be completely filled out by the sponsor.
2. Please type or print legibly, filling in all information.
3. If you have any questions concerning your pilgrim's participation, please contact the registrar.
4. It is recommended that the sponsor not work the same walk your pilgrim attends. If you do work the same walk, a co-sponsor is needed, and your contact with the pilgrim should be avoided.

Pilgrim's Name: _____ Pilgrim's Phone: _____
 Sponsor Name: _____ Home Phone: _____
 Address: _____ Cell Phone: _____
 City, State: _____ Zip: _____ Church attending: _____
 E-mail address: _____
 (Please Print **VERY** Clearly)

Where and when did you make your Emmaus Walk / Walk # / other 3-Day Weekend? _____

Are you praying and sacrificing for your pilgrim?.. (Circle one) Yes No Are you now in a Reunion Group? (Circle one) . Yes.. No

Will you commit to pray for the pilgrims and the team during the 72 Hour Prayer Vigil by calling for a Prayer Vigil time as outlined in the

Sponsor's Checklist? (Circle one) Yes No Date / Time: _____ (Circle one) am pm
 (1 hour increments from Thursday 5 pm to Sunday 6 pm)

How long have you known the candidate? _____ Why do you feel this person would be a good pilgrim? _____

SPONSOR'S COMMITMENT	Yes	No	Not Applicable
I am able and willing to assist my pilgrim in getting into a Reunion Group			
I have discussed the Walk to Emmaus with my candidate's spouse			
I will bring my pilgrim to the Emmaus site			
I will attend Sponsor's Hour			
I will attend Candlelight			
I will attend Closing			
I can care for the needs of my pilgrim's spouse and family over the weekend			
I have explained the post-weekend reunion to my candidate			
I am aware of the importance of minimal contact with my pilgrim during the weekend, (especially if the pilgrim is my spouse)			
My candidate has the physical and mental health for a Walk to Emmaus weekend			
My candidate is not under any temporary emotional strain that might indicate his/her weekend should be in any way delayed or postponed			
I understand that if my pilgrim has a serious illness, injury, or surgery prior to their scheduled walk that I must contact the registrar as soon as possible.			
I understand that both husband's and wife's applications should be submitted together. A note of explanation is enclosed with this application if only one is being submitted.			

I understand that the "Walk To Emmaus" is a cloistered event and that all persons working or attending events during the weekend have participated in and completed a walk or similar event. I will explain this to my pilgrim. We acknowledge that all participants, both pilgrims and team members will be missing spouses and children; so in fairness to all, it is requested that no family member or children be brought to any event during the weekend. The experience is to be one away from the distractions of every day life.

Sponsor Signature: _____