



Wabash Valley Walk to Emmaus Pilgrim Application 2023

SECTION 1: TO BE COMPLETED BY APPLICANT:

First and Last Name:

Gender:

Mailing Address:

Phone Number:

Can you receive text messages at the above number?

Email Address:

Age at the time of the walk:

T-Shirt Size:



Home Church Name and Location:

Pastor's Name and Phone Number:

Sponsor's Name and Phone Number:

Has your sponsor explained the weekend to you?

Do you have any food or environmental Allergies? If so, please explain.

Do you have medical/physical needs that would require you to be on a bottom bunk or need a golf cart to get from the Bliss Center to the church during the weekend? If so, please explain below: (Example: I have a Cpap and need a bottom bunk.)

What do you hope to gain from your Walk to Emmaus experience?

SIGNATURE OF APPLICANT:

_____ **DATE:** _____



SECTION 2: TO BE COMPLETED BY SPONSOR:

First and Last Name:

Home Phone:

Mailing Address:

Email Address:

Home Church Name and Location:

Your Walk/Flight/Journey/Banquet Date and Location (to the best of your recollection):

How long have you known this person?

Will you fulfill all sponsorship responsibilities (Praying for your Pilgrim, Explaining the Weekend, Taking them to and from Camp, Attending Sponsor's Hour, Candlelight, and Closing, and Paying their weekend Fee of \$75?)

Yes % No %

If not, who have you designated?



Why do you think Walk to Emmaus is appropriate for your applicant or is needed?

SIGNATURE OF SPONSOR:

_____ **DATE:** _____

Please mail your completed application along with your \$75 weekend fee to:

Kaitlyn Lasswell
2007 State Street
Lawrenceville, IL 62439

(Checks should be made out to **Wabash Valley Chrysalis**)