

# PILGRIM APPLICATION

- ALL INFORMATION AND 3 SIGNATURES ARE REQUIRED FOR PLACEMENT ON A WALK
- PILGRIM COMPLETES THEIR PORTION AND SIGNS
- PILGRIM'S PASTOR COMPLETES AND SIGNS THE CLERGY PORTION OF THE FORM
- THE COMPLETED FORM IS FORWARDED TO PILGRIM'S SPONSOR TO COMPLETE AND SIGN SPONSOR PORTION OF THE FORM
- SPONSOR EMAILS COMPLETED FORM WITH ALL SIGNTURES TO <u>COASTALBENDEMMAUS@YAHOO.COM</u> OR MAILS VIA USPS TO TREASURER, COASTAL BEND EMMAUS, PO BOX 273, CORPUS CHRISTI, TX 78403

### \*\*See current schedule for dates and registration fees found on website at coastalbendemmaus.org

REGISTRATION FEE MUST BE SUBMITTED WITH THIS FORM. OTHERWISE, THE PILGRIM WILL ONLY BE REGISTERED AS "WAIT LIST" UNTIL FEE HAS BEEN PAID IN FULL. PLEAES CHECK WITH LOCAL FOURTH DAY GROUPS FOR SCHOLARHSIP ASSISTANCE AND INFORMATION.

| Walk #  | Walk Dates                 | Payment Enclosed          | Paid via PayPal      | Date Paid        |                  |
|---|----------------------------|---------------------------|----------------------|------------------|------------------|
|   |                            | **Amount Paid             |                      |                  |                  |
| If you are put on the   | wait list, can you attend  | on short notice? 1 We     | ek 3-4 Days          | Less than 3 [    | Days:            |
| Last Name:  | F                          | irst Name:                | Name                 | e Tag:           |                  |
| Male Female<br>Address:   | Date of Birth:             | Email Addre               | 255:                 |                  |                  |
| Address:  |                            | City:                     |                      | State:           | _Zip:            |
| Home Phone:   | Work F                     | Phone:                    | Cell/Othe            | er:              |                  |
| Church Name presently a   | ttending:                  | City                      | Denominati           | on of Church:_   | 7in:             |
| Address of Church:<br>Marital Status:   | Numbo                      | City<br>r of Childron:    | Ordainad             | State            | zıp              |
| Occupation:   |                            |                           |                      | clergy: res_     | NO               |
| Has the Walk been fully explained to you? Yes No Has Post Walk follow up been explained? Yes No<br>Name of local Emmaus 4 <sup>th</sup> Day Group for Post Walk gatherings that you will be ending (check with your sponsor if<br>unclear what the name is) |                            |                           |                      |                  |                  |
| Do you smoke? Yes<br>If YES ~ Please explain:   |                            |                           | ecial Dietary need   | s? Yes           | No               |
| Do you have any special h<br>If YES ~ Please explain:   | nealth problems, handica   | aps or physical needs? Y  |                      |                  |                  |
|   | <b>REGISTRATION</b>        | CANCELLATION/CHANG        | E/REFUND POLICY      | :                |                  |
| All changes in Walk Re  | egistration must be subr   | nitted to the Emmaus O    | ffice in writing (by | email/fax/mai    | I). Registration |
| fees can be transfe   | rred in full to another ev | vent or pilgrim before th | e cancellation dea   | dline. Full refu | unds must be     |
|   | issued to the payer of     | the registration fee min  | us a \$25 processin  | g fee.           |                  |
| Pilgrim Signature:  |                            |                           | Date:                |                  |                  |

Check payable to: "Coastal Bend Emmaus." Mail this completed form and fee to: Coastal Bend Emmaus Registrar, P.O. Box 273, Corpus Christi, TX 78403

#### **CLERGY INFORMATION (See Signature Required #2 of Instructions)**

| Print Pilgrim's Name:                              | Print Clergy Name:                        |  |  |
|--|---|--|--|
| Your Pastor's Signature:                           | Church Name & Address:                    |  |  |
| Have you attended Emmaus, Cursillo, Tres Dias or a | ny other recognized 3-day Weekend? Yes No |  |  |

Have you been asked to serve on a Team? Yes \_\_\_\_\_ No \_\_\_\_\_ Would you like to serve on a team? Yes \_\_\_\_\_ No \_\_\_\_\_

## **SPONSORS INFORMATION (See Signature Required #3 of Instructions)**

Sponsorship is the most important job in Emmaus. The quality of sponsorship influences the pilgrim, the health of the Emmaus movement, and the Church being affected by Emmaus. Thank you for your dedication and effort to promote the Emmaus vision of developing Christian leaders who will strengthen the local Church. It is important for the success of the Walk for you to be a fully participating sponsor. *If you cannot answer YES* to all of the following, then please reconsider whether you are best suited to act as this applicants sponsor.

| Where did you attend your Emmaus/Cursillo (or other recognized 3-day experience? |        |  |  |  |
|--|--------|--|--|--|
| When?  | Walk # | Are you in an active Reunion Group? Yes No |  |  |

(If not active in a reunion or accountability group, please make every effort to join one soon. This is an essential part of the weekend experience.)

Yes \_\_\_\_ No \_\_\_\_ Are you active in your local Church? Yes \_\_\_\_ No \_\_\_\_ Are you praying for your candidate? Yes \_\_\_\_ No \_\_\_\_ Will you personally bring your candidate to the Emmaus site on Thursday night? Yes \_\_\_\_ No \_\_\_\_ Will you care for the needs of your Candidates spouse? (Examples: Mow the lawn, help with emergency tasks, offer childcare to give the spouse a break, help the family get to Church?) Yes \_\_\_\_ No \_\_\_\_ If the candidate is married, have you discussed the Walk with their spouse? Yes \_\_\_\_ No \_\_\_\_ Have you informed the candidate and spouse that they should expect to have no contact During the weekend, except in case of emergency? Yes \_\_\_\_ No \_\_\_\_ Has candidate suffered from a loss this past year? Yes \_\_\_\_\_No \_\_\_\_\_Is the candidate emotionally ready to attend? Yes \_\_\_\_\_No \_\_\_\_\_Are you able and willing to assist the candidate to get into a reunion group? Yes \_\_\_\_\_No \_\_\_\_\_Have you explained the post-emmaus follow-up meeting? Yes \_\_\_\_\_No \_\_\_\_\_Will you bring agape food & gifts? Yes \_\_\_\_\_No \_\_\_\_\_Will you bring agape food & gifts? Yes \_\_\_\_\_\_No \_\_\_\_\_Can you fulfill sponsor responsibilities if your candidate attends on short notice? *As a sponsor you are responsible to participate in the following events. Please indicate the events you will attend?* Registration Sponsor's Hour Worship

| Registration | sponsor's nour    | worship         |
|--------------|-------------------|-----------------|
| Closing      | Follow-Up Meeting | First Gathering |

**PLEASE PRINT:** (Please check YES \_\_\_\_\_\_ if this is a new address)

| Sponsor's Last Name:                   |                                | First Name:<br>City/State/Zip:                  |          |  |
|--|--------------------------------|---|----------|--|
| Address:                               |                                |   |          |  |
| Home Phone:                            | Work Phone:                    |   | Other #: |  |
| Email Address:                         |                                |   |          |  |
| How long have you know this candidate? |                                | Is this candidate active in their local Church? |          |  |
| If you were on the team wo             | uld you be encouraged to have  | this person as a candidat                       | te?      |  |
| What characteristics does th           | is candidate show that exhibit | s his/her commitment to                         | Christ?  |  |
|  |                                |   |          |  |

To YOUR knowledge, does this candidate have an addiction that would prevent full participation? \_

**\*\*\*If answer is yes to the last question, it is advisable to wait to sponsor this pilgrim until the issues are resolved\*\*\*** As a sponsor, I say YES to Christ – to fulfill my responsibilities 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 commitment to the high calling of servant hood.

Sponsor's Signature: \_

Form Rev. March 2023



# Instructions for completion of the Coastal Bend Emmaus Walk to Emmaus Pilgrim Application

In accordance with the policies established by the Board of Directors, I ask you take special note of the following questions on this Pilgrim Application. The Board has directed the Registrar to return any application in which these questions are not fully answered and to request additional information before accepting the application.

# **INFORMATION REGARDING YOUR CHURCH MEMBERSHIP**

Because Emmaus is not intended to make disciples, but rather strengthen those who are already disciples, persons accepted for a Walk to Emmaus are expected to be ACTIVE members of a Christian congregation. ALL EXCEPTIONS TO THIS POLICY must be approved in advance by the Community Spiritual Director (s), please make note of this before you send the application in. Otherwise the form may be returned.

Please indicate on the form the NAME and DENOMINATION of the congregation in which you are an ACTIVE member. Persons who are members of one congregation but are actively attending another congregation should confront the issue where GOD is calling them to service and make a commitment to a worshipping community before applying for a Walk to Emmaus, so that they are ready to participate FULLY in that community upon their return from the Walk to Emmaus.

**HAS THE WALK TO EMMAUS BEEN EXPLAINED TO YOU?** – Make sure you are fully aware of what the Walk to Emmaus is all about, if you have a question, please ask your sponsor for more information. Your sponsor should not sign this form until he/she has explained Emmaus and its follow up to you.

**IF THE WALK IS CANCELLED OR PILGRIM CANNOT ATTEND** – The Sponsor, Pilgrim and/or Lay Director may request for a refund, or request for a transfer to a future Emmaus Walk. If the pilgrim is paid in full and application on file, you will not need to submit a new application. Whether you are requesting for a refund or transfer, a request must be made in WRITINJG either through email, fax, or regular mail to the registrar's office.

**INFORMATION ON SPECIAL NEEDS** – It is especially important to know if you have any special needs or challenges. It is rare that any such need cannot be met, but so that you can participate fully in the Walk to Emmaus. We would like to know as far ahead as possible in order for leadership to make your Walk a fulfilling experience for you.

## NONE OF THIS INFORMATION WILL BE RELEASED EXCEPT TO THOSE RESPONSIBLE FOR NEEDING YOUR NEEDS. SIGNATURES REQUIRED ON THE FORM

There are three signatures that are REQUIRED for reservation. All of them need to be present or the form will be returned to you for completion, which may result in a delay of your registration. IT IS THE RESPONSIBILITY OF THE **SPONSOR** TO SEE THAT THESE SIGNATURES ARE ALL PRESENT!

- 1. YOUR SIGNATURE This is your free commitment to accept God's invitation to attend the Walk. Therefore, the form must be signed by you personally, not your sponsor, spouse, friend, or parent (they cannot make such a free commitment for you).
- 2. YOUR PASTOR'S SIGNATURE This signature is a commitment of the clergy member of the congregation that you serve to work with you in developing your service to God after the Walk. The Clergy member does not have to have been on a walk him/herself, however, the Walk is not intended to bypass usurp the authority of the pastor of your congregation in any way. If your pastor is opposed to your attending a Walk, it will be difficult for you to serve effectively after your walk, and you may feel frustrated and discouraged. Your SPONSOR or the Spiritual Director of the Community may contact the Clergy member if he/she is hesitant or uncertain.

### OBVIOUSLY IT IS MEANINGLESS TO HAVE ANY MINISTER OTHER THAN YOUR OWN SIGN THIS FORM, SINCE THAT WOULD COMPLETELY DEFEAT THE PURPOSE OF THE PASTOR'S SIGNATURE.

3. YOUR SPONSOR SIGNATURE – This is your sponsor's commitment to both you and the Emmaus Community, that he/she is willing to help you prepare for your walk, care for your family while you are away, and help you become more active in service after the Walk. This signature emphasizes the great importance the Walk to Emmaus places on your sponsor.