



IDAHO WALK TO EMMAUS PILGRIM APPLICATION

Please indicate the Emmaus walk you will attend: Winter Fall Year _____

NOTE: THIS IS ONLY AN APPLICATION: After you have completed this application, please give it to your sponsor so they may submit it for you. You will be sent a letter of confirmation. Notification of your assigned weekend will be made to you by mail. Form 081017

APPLICANT INFORMATION (Please print clearly)

First Name:		Last Name:		Nametag:	
Address:		City:		State:	Zip:
Home Phone:	Cell Phone:	Email:			
Occupation:	Date of Birth:	Age:	Home Church:		
Marital status: M <input type="checkbox"/> <input type="checkbox"/> D <input type="checkbox"/> W <input type="checkbox"/>		Has spouse attended Walk to Emmaus? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Is spouse attending adjacent walk? <input type="checkbox"/> Yes <input type="checkbox"/> No		Spouse's name:			
Please list your church activities:					
Please list your hobbies and interests:					

MEDICAL INFORMATION (MUST be completed)

Please list any physical limitations or diet restrictions:

Do you take any medications during the day (other than at bedtime or upon arising) Yes No

EMERGENCY CONTACT (OTHER THAN SPONSOR OR SPOUSE)

Name:	Relationship:	Phone:
Address:	City/State/Zip:	Email:
<p>The intent of the Walk to Emmaus weekend is to allow you a personal and individual experience of walking with our Lord and Savior, Jesus Christ. If you have any questions, please ask your sponsor.</p>		DATE:
<p>APPLICANT SIGNATURE:</p> <p>_____</p>		<p>_____</p>

PASTOR INFORMATION (Please complete ALL blanks and print clearly)

The focus of the Walk to Emmaus is God, as known in Jesus Christ, and how that finds expression in the local church. The objective of the Walk to Emmaus is to inspire, challenge, and equip local church members for Christian action in their homes, churches, and places of work. Emmaus lifts up a way for our grace-filled life to be lived and shared with others.

Pastor Name and Signature:	Church Name:	
Church Address:	City/State/Zip	Church Phone



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SPONSOR ENDORSEMENT

SPONSOR INFORMATION (Please complete ALL blanks and print clearly)

First Name:		Last Name:	
Address:		City:	State: Zip:
Home Phone:	Cell Phone:	Email:	

Home church: (no abbreviations please)

Date/Place of your Walk to Emmaus/Cursillo weekend:

YOUR PILGRIM: Please specify any medically-necessary dietary needs:

**** IMPORTANT**:** Have you completed Idaho Walk to Emmaus Sponsorship training either from an IWTE board member or online at training.idahoemmaus.org?
Yes No If no, then please contact the Idaho WTE Registrar or any Board member.

Please verify the following statements are true by placing a check on each box preceding the statement

- If applicable, I have discussed the walk with my pilgrim's spouse and encouraged the spouse to attend the adjacent weekend.
- I am praying for my pilgrim.
- I have explained the Emmaus walk to my pilgrim.
- I understand that I am to bring my pilgrim to the church on Thursday at 7pm and stay for Sponsor's Hour, support Candlelight Saturday at 8pm, be at the church at 2:30pm on Sunday for Closing, and then take my pilgrim home.
- I will accompany my pilgrim to the first gathering following my pilgrim's walk.
- I will assist my pilgrim in getting established in a reunion group after the walk.

The Walk to Emmaus is a method of Christian renewal in the church. Individuals recommended for Emmaus should be currently active in a local church and have a desire to deepen their faith and become closer to Christ in their discipleship. As a sponsor, you are required to provide information to the applicant to assist him/her in the decision to attend a weekend, to help him/her enter fully into the Emmaus fellowship after the weekend, to provide prayer and other support, and to provide transportation to and from the church. As a sponsor, your signature is a covenant to a vital responsibility as a member of the Emmaus community.

SPONSOR SIGNATURE (Required) **DATE:**

Sponsors should check this form for completeness and then submit with fee.
The fee to attend the Idaho Walk to Emmaus is \$75. Checks should be made payable to IWTE.

MAIL TO: Char Boyd (IWTE Registrar) 1337 Cerramar Court, Eagle ID 83616; phone 303-204-1059

or Scan and Email to: cbpianomom@gmail.com

Registrar Use Only	
Date Received:	_____
Pilgrim Conf. Ltr:	_____
Sponsor Conf. Ltr:	_____