

## **GUIDELINES FOR COMPLETING SPONSORSHIP FORM AND PILGRIM APPLICATION**

The sponsor's responsibilities start with prayerful consideration of friends and family who would benefit from the Walk to Emmaus weekend. A sponsor is expected to be open to the leading of the Holy Spirit when thinking about sponsoring a married couple or single person and be in prayer while the couple or person is considering the possibility of attending a Walk to Emmaus weekend..

The "Pilgrim Application" MUST be carefully reviewed by the sponsor. It is expected that the sponsor understands the criteria for participation of a pilgrim on the weekend. More importantly, any sponsor is expected to have been praying for the leading of the Holy Spirit before approaching any candidate about participating in the weekend..

1 Make certain that all information requested is COMPLETELY filled in. Failure to complete all areas of the application could result in its being returned to you for completion.

The pilgrim fee is \$200.00. Each pilgrim is to contribute \$40.00 beginning with the 2011 Fall walks. The remaining \$160.00 will be provided by the sponsor. THESE FUNDS MUST B INCLUDED WITH THE APPLICATION OR IT WILL BE RETURNED. However, no pilgrim should be denied the opportunity to participate due to financial constraints. Sponsors should check with their gatherings or the Registrar if help is needed.

2. An explanation of the circumstances is required if an applicant's spouse does not intend to participate in weekend the same year. An equal commitment among a married couple is strongly encouraged. This does not mean that the Walk to Emmaus weekend is limited to married couples.

3. An explanation of Post-Emmaus follow-up, small group reunion, and the desire for the prospective pilgrim's participation in 4<sup>th</sup> Day follow-up should be provided during your explanation of the weekend and before a decision is reached regarding attendance on a weekend.

4. Please make certain that you adequately explore any dietary restrictions which could be a problem on the weekend. Remember, if your pilgrim is on a diet incompatible with the meals served on the weekend, you are expected to provide food compatible with the pilgrim's diet to the Innabah staff.

5. Please check your pilgrim's application before mailing to make certain that all requested information has been provided and is clearly readable.. This will eliminate the need for additional phone calls or return of the application.

6. All sponsors will be notified of their pilgrim's acceptance, in writing, approximately three (3) months prior to the walk.

**The Walk to Emmaus Weekend is a 72 hour, cloistered experience that requires a time commitment from 7:30pm on Thursday evening through 7:00 pm on Sunday evening of the scheduled weekend.**

Revised February 2011

## CROSSROADS WALK TO EMMAUS OF EASTERN PA SPONSORSHIP FORM

Good sponsorship is the foundation for a healthy, effective Emmaus Movement that fulfills its true purpose—the development of Christian leaders and the renewal of the Church in Ministry. The quality of sponsorship influences the Pilgrim, the health of the Emmaus Movement, and the Church. Remember, sponsorship is the first act of Agape that you will provide for your Pilgrim.

I wish to sponsor \_\_\_\_\_ on the Crossroads Walk To Emmaus Weekend  
(applicant's name) Spring \_\_\_\_\_ Fall \_\_\_\_\_ Year \_\_\_\_\_

**BEFORE SUBMITTING THIS APPLICATION, HAVE YOU AS SPONSOR:**

- \*\*\*Prayed to God about sponsoring this applicant?
- \*\*\*Made certain they are applying by their own choice, not yours?
- \*\*\*Explained that the Walk To Emmaus is a commitment to Christian living?

NOTE: If applicant is married, have you fully discussed the Walk To Emmaus program & weekend with the spouse.

Sponsor's Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Sponsor's Address \_\_\_\_\_

Sponsor's City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Your E-Mail Address \_\_\_\_\_ Do you check your e-mail regularly? \_\_\_\_\_

Have you attended a Fourth Day Workshop? \* \_\_\_\_\_ When? \_\_\_\_\_

*\*This is a requirement for sponsorship. If you have not attended a 4<sup>th</sup> Day Workshop, you will need a co-sponsor who has attended*

.Please explain, to the best of your knowledge, your applicant's relationship with Christ and where they are on their personal "Walk"

**Has the prospective pilgrim received a copy of the "What Is Emmaus" book from you?** YES \_\_\_\_\_ NO \_\_\_\_\_

Gathering pilgrim will attend: Joyful Journey \_\_\_\_\_ Rock of Joy \_\_\_\_\_ Ezekiel's Call \_\_\_\_\_ Garden Spot \_\_\_\_\_  
Hallelujah \_\_\_\_\_ Schuylkill Servants \_\_\_\_\_ 4<sup>th</sup> Day Disciples Blessed By Grace \_\_\_\_\_ Upward Bound \_\_\_\_\_ Faith Alive \_\_\_\_\_  
Gathering at the River \_\_\_\_\_ The Opened Eyes \_\_\_\_\_ Emanuel-Olivet \_\_\_\_\_ Friends of God \_\_\_\_\_

Are there any special circumstances the team should be aware of? \_\_\_\_\_ If YES, please explain

Does the applicant definitely need a lower bunk? Yes \_\_\_\_\_ No \_\_\_\_\_

Will you, as sponsor, support this Pilgrim:

- |   |   |
|---|---|
| _____ At sponsor's communion  | _____ Encourage their attendance at gathering |
| _____ At candlelight  | _____ Attend gathering myself                 |
| _____ At closing  | _____ Keep in contact on a regular basis      |
| _____ Enable them to attend a 4 <sup>th</sup> Day Workshop            | _____ Introduce them to small group reunion   |
| _____ Support them on their 4 <sup>th</sup> Day as a Christian friend |   |

MAIL PILGRIM & SPONSOR APPLICATIONS & FEES TO:

***\$160.00(sponsor) and \$40 non-refundable (pilgrim)***

John Keenan  
739 Main St; Phoenixville, PA 19460  
keenanjj1@verizon.net

Make checks payable to Crossroads Walk To Emmaus EPC

APPLICATION FEES **MUST** ACCOMPANY APPLICATIONS

(If special financial arrangements are needed, contact registrar at 610-933-3332, or cell: 619-246-5388.)

# PILGRIM APPLICATION

## CROSSROADS EMMAUS OF EASTERN PENNSYLVANIA

The Walk To Emmaus is a method of living, sharing, and spreading Christianity. If you are a Christian actively participating in a local congregation and consider yourself to be an emotionally healthy, mature, and responsible person, then the Walk To Emmaus may bring you to a closer understanding of Christ and His mission for you.

To apply, please provide the following information, which is necessary to plan your welcome to the Walk To Emmaus. Please print or type and complete **ALL** items. This information will be kept in strict confidence, and will be destroyed when you complete your weekend or find it necessary to cancel.

Name \_\_\_\_\_  
(FIRST) (LAST) (NAME DESIRED ON NAME TAG)

Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Marital Status \_\_\_\_\_ Your Age \_\_\_\_\_ Sex \_\_\_\_\_

Your E-Mail Address \_\_\_\_\_ Do you check your e-mail regularly? \_\_\_\_\_

Laity \_\_\_ Clergy \_\_\_ (check one) Spouse's First Name \_\_\_\_\_

**NOTE:** The Walk To Emmaus is intended for joint commitment. If you are married and both active in church, spouse's application, or explanation of circumstances, must accompany this application. Please discuss this with your spouse.

Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Education \_\_\_\_\_ Hobbies \_\_\_\_\_

Pastor's Name \_\_\_\_\_

Church Name \_\_\_\_\_ Church Phone no. (\_\_\_\_) \_\_\_\_\_

Church Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Church Activities \_\_\_\_\_

Community Activities \_\_\_\_\_

Why would you like to attend the Walk To Emmaus \_\_\_\_\_

**Have you received and read the "What Is Emmaus" booklet from your Sponsor?** YES \_\_\_\_\_ NO \_\_\_\_\_

Do you have any health problems, or other special needs, which we should know about? \_\_\_\_\_

If yes, please specify \_\_\_\_\_

Are you on a special diet? \_\_\_\_\_

Medications \_\_\_\_\_

In case of emergency, notify: \_\_\_\_\_ Phone # (\_\_\_\_)-\_\_\_\_\_

If accepted for the weekend, you will be notified, in writing, approximately **THREE MONTHS** in advance. Participants will assemble on Thursday evening. Transportation will be arranged by your sponsor.

\_\_\_\_\_  
(DATE)

\_\_\_\_\_  
(APPLICANT'S SIGNATURE)

After you have completed all items on this form, please return to your sponsor. Please include a \$40 non-refundable fee. Check should be made out to *Crossroads Walk to Emmaus EPC*.