



Pilgrim Application

Location:

Dates:

Four daily sessions from 9 am to 4 pm

(Must attend all sessions)

Applicant Information:

Name _____

Address _____

Phone Number _____

E-mail address _____

Age ____ **Current or Previous Occupation** _____

Church Affiliation _____

Any Dietary restrictions: _____ **or Disabilities** _____

Are you being sponsored on this Encounter? Check: Yes _____ No _____

If yes, name of Sponsor _____

(Please turn page over and complete information on back of page)

Contact Information

Spouse and/or Family member:

Name (and relationship) _____

Phone no. _____

E-mail _____

Pastor:

Name _____

Phone No. _____

E-mail _____

Friend:

Name _____

Phone No. _____

E-mail _____

(Information will not be shared outside of Face to Face and Crossroads Walk to Emmaus)

Completed Applications are to be submitted to:

by e-mail at _____

Fee for this Encounter is \$50 and are to be submitted with the application. Fee is payable by check to Crossroads Walk to Emmaus of EPA.