

Walk to Emmaus-Pilgrim Application – Hoosier Hills Community – Walk # _____

(Please Print Clearly)

Name _____ Preferred Name (for name tag) _____

Address _____ Email _____

City _____ State _____ Zip _____ Phone# _____ Cell# _____

Church Name _____ Occupation _____

Martial Status Single__ Married__ Separated __ Divorced __ Widow(er) __ Age__ Sex __ (M/F)

Please answer the following questions:

1. Has the Walk to Emmaus been explained to you? Yes__ No__
2. Has the follow up program been explained to you? Yes__ No__
3. Medical information (food allergies, special diets, health or physical limitation) If yes, please explain:

4. Do you need financial assistance to attend? Yes__ No__ (³⁰~~\$20~~.00 pre-registration fee is required)
a. If yes, your sponsor will take care of this.
5. Do you have a sponsor? Sponsor's name _____
6. Do you mind having your name shared with the Hoosier Hills Community, after your attendance is confirmed?
Yes__ No__

Comments: If necessary please use the back of the form to complete your answers to the following questions.

How did you learn about the Emmaus program? _____

What are the activities and responsibilities that you are involved in at your church? _____

In what other religious or community organizations are you active? _____

Briefly state why you wish to be involved in Emmaus and what you expect from it. _____

³⁰
Please enclose ~~\$20.00~~ ³⁰ pre-registration fee with this application. This will be applied toward your total contribution of ~~\$20.00~~ ³⁰, which partially offsets the actual cost of the weekend. The deposit is not refundable. Please make checks payable to Hoosier Hills Emmaus Community. If you decline the invitation, a new application must be submitted with a new deposit.

³⁰
****Both the pilgrim and sponsor applications, along with the ~~\$20.00~~ ³⁰ registration fee, need to be submitted by the sponsor****

NOTE: THE CAMP FACILITY BEING USED IS A TOBACCO FREE/FIREARM FREE ENVIRONMENT.

Your Signature _____ Date _____

Please mail to: Bonita Page - 602 East Spring Street Bloomfield, IN 47424 Ph: 812-227-0331

Or – Email to: – bjep964@aol.com