

Walk to Emmaus Reservation Request
Quad Cities Community of the Walk to Emmaus
P.O. Box 971, Moline, IL 61266

Candidates Information:

Last Name: _____ Address: _____
First Name: _____ City: _____
Preference for name tag: _____ State _____ Zip _____
Phone: _____ E-mail: _____
Age: _____ Marital Status: Married Single Divorced Widowed Separated
Spouse Name: _____ Spouse Walk #: _____

Church Information

Denomination: _____ Church Name: _____
Pastor's Name: _____ Location: _____

Activities and Organizations

In what religious or community organizations are you active?

Personal Information

Occupation: _____ Employer: _____

Quad Cities Walk to Emmaus & it's Host location "Camp Summit," are smoke in designated areas

Has the Walk to Emmaus been explained to you, as well as follow-up? Yes No

And post Walk opportunities and meetings? Yes No

Do you have special: Dietary Needs? Medications? Physical Limitations? (We will try to accommodate) _____

State briefly why you wish to be involved in the Emmaus Community and what you expect from the weekend: _____

Signature: _____ Date: _____

Sponsor's Name: _____ Walk Date Preferred: _____

Return this application along with the non-refundable \$50 deposit to your sponsor who will complete the sponsor information and submit the application for you. (The total weekend cost is \$125.) Space is limited - if the weekend you prefer is filled, you will be on the waiting list for the next weekend. Make check payable to: Quad Cities Walk to Emmaus Community.

For office use only: Registration fee received on

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Sponsors Information

Sponsors Name: _____ **Address:** _____
Walk or Cursillo No.: _____ **City:** _____
Walk or Cursillo Date: _____ **State:** _____ **Zip:** _____
Phone: _____ **E-mail:** _____
Are you in a reunion group? Yes No Would you like to be? Yes No

Pilgrim's Name: _____
Why do you feel your candidate would be a good participant at this time? _____

Please share any information that would assist the walk leadership in better meeting the needs of your candidate (health/physical limits/special diet/emotional):

Sponsors Checklist

- Discuss the Walk with candidate & spouse - explain equal commitment
- Pray & sacrifice for candidate
- Obtain agape letters
- Bring candidate to the Walk site or arrange for same
- Attend to the needs of the candidate's family if needed
- Assist in getting your pilgrim into a Group Reunion
- Attend the Sponsor's Hour, Candlelight and Closing or arrange for a stand-in

Please submit the completed registration form to the registrar or mail to: Quad Cities Community of the Walk to Emmaus, P.O. Box 971, Moline, IL 61266.

Note: Husband and wife applications should be submitted at the same time. Any exceptions to equal commitment will be at the prayerful discretion of the Spiritual Director and the Board of Directors' Executive Committee.

Sponsor Signature(s): _____
Date: _____