

# Alabama Walk To Emmaus Application

(Held At Camp Sumatanga, Gallant, AL)

P.O. BOX 38  
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[www.alaemmaus.org](http://www.alaemmaus.org)

REV (3/2022)

<p>The Walk to Emmaus is a 3-day experience sponsored by the Upper Room, a division of the United Methodist Church. The purpose of the walk is to foster spiritual renewal by offering a "short course in Christianity" and provide a model for Christian accountability groups. It is intended for established Christians who want a refresher in the basic tenets of our faith and an opportunity for spiritual development through the sharing of God's grace.</p>			
<p><b>Section 1: To be completed by Candidate (Please print or type a response to all questions or application will be returned.)</b></p>			
Name:		Name For Name Tag:	
Address:		Gender: Male	Female
City:		State:	Zip:
Phone (Home/Cell):		Email Address:	
Church You Attend (Include Denomination):			
Age:	Occupation/Employer:	Work Phone:	
Religious/Community Organizations You Are Involved In:			
Spouse's Name:		Has Spouse Attended Or Now Scheduled For A Walk? Y N If Yes, Walk No.:	
Describe any special diet or medication schedule:			
Describe any health or physical problems that may affect your participation:			
Briefly state why you applied to attend the Walk To Emmaus:			
Candidate Signature:		Date:	
<p>A pre-registration deposit of \$30.00 must be included with the application. This will be applied toward your registration fee of <b>\$200</b>. THE REMAINING BALANCE OF <b>\$170</b> IS TO BE PAID WHEN AN ASSIGNED WALK IS ACCEPTED. Make check payable to: Alabama Emmaus Community. Registration fees are subject to change. <b>PRE-REGISTRATION DEPOSIT IS NOT REFUNDABLE OR TRANSFERABLE.</b></p>			
<p><b>Section 2: To be completed by Sponsor and Co-Sponsor (Please print or type a response to all questions or application will be returned.)</b></p>			
Sponsor Name:		Email Address:	
Address:		City:	State: Zip:
Phone: (Home/Cell)		Church & Denomination:	
Cluster:		Your Walk Weekend: Location & Number?	
How long have you known your pilgrim?		Number of pilgrims sponsored last year?	
Co-Sponsor Name:		Email Address:	
Address:		City:	State: Zip:
Phone: (Home/Cell)		Church & Denomination:	
Cluster:		Your Walk Weekend: Location & Number?	
How long have you known your pilgrim?		Number of pilgrims sponsored last year?	
Any known health condition or situation that would prevent your pilgrim from completing the walk? Y N If yes, please describe:			
Are you familiar with the responsibilities of a sponsor? Y N		Are you prepared to fulfill these responsibilities? Y N	
Have you explained to your pilgrim: The Emmaus Weekend? Y N		Follow up? Y N Reunion Group? Y N	
Sponsor Signature:		Date:	Would you like an email confirmation? Y N
Co-Sponsor Signature:		Date:	Would you like an email confirmation? Y N
OFFICE USE ONLY: Date Received:		Assigned To Walk Number: Deposit:	