CROSSROADS OF EASTERN PENNSYLVANIA
71st WALK TO EMMAUS TEAM APPLICATION 2026
MEN'S WALK: APRIL 8-11, 2027
WOMEN'S WALK: APRIL15-18, 2027

NAME: _____ **NICKNAME:**_____

ADDRESS: _____

PHONE: _____ **EMAIL**: _____

WALK ATTENDED: _____

ATTENDED FOURTH DAY WORKSHOP? _____

GATHERING: _____

HAVE YOU SERVED ON TEAM BEFORE? CHECK ALL THAT APPLY:

_____WALK TO EMMAUS
_____CHRYSALIS
_____FACE TO FACE

PLEASE CHECK ALL POSITIONS HELD:

_____LAY DIRECTOR
_____ASSISTANT LAY DIRECTOR
_____TABLE LEADER
_____ASSISTANT TABLE LEADER
_____BOARD REPRESENTATIVE
_____OUTSIDE TEAM LEADER
_____OUTSIDE TEAM MEMBER
_____SONG LEADER

PLEASE CHECK ALL TALKS GIVEN:

_____PRIORITY
_____CHANGING OUR WORLD
_____PRIESTHOOD OF ALL BELIEVERS
_____GROW THROUGH STUDY
_____PIETY
_____DISCIPLESHIP
_____CHRISTIAN ACTION
_____BODY OF CHRIST
_____PERSEVERANCE
_____FOURTH DAY

HOW DO YOU SUPPORT THE CROSSROADS EMMAUS COMMUNITY?
CHECK ALL THAT APPLY:

_____GATHERING
_____AGAPE
_____WEEKEND PREPARATION
_____WEEKEND DAY SERVANT
_____PRAYER VIGIL
_____ATTEND WEEKEND SENDOFF
_____ATTEND CANDLELIGHT
_____ATTEND WEEKEND CLOSING
_____FOURTH DAY

WHERE DO YOU WORSHIP? _____

ARE YOU IN A SMALL GROUP OR REUNION GROUP? _____

WHAT INSTRUMENTS DO YOU PLAY? _____

DO YOU SING IN A CHOIR OR GROUP?_____

WILL YOU PARTICIPATE IN ALL TEAM TRAINING MEETINGS? (PLACE TO BE DETERMINED)

- **SATURDAY, JANUARY 9**
- **SATURDAY, JANUARY 30**
- **SATURDAY, FEBRUARY 20**
- **SATURDAY, MARCH 20**

IF NO, PLEASE EXPLAIN:_____

_____

ANY MEDICAL OR DIETARY RESTRICTIONS? (i.e., walking, lower bunk, need bed near an outlet for medical device, vegetarian, gluten-free, etc.) **PLEASE EXPLAIN:**

_____

_____

EMERGENCY CONTACT NAME: _____

EMERGENCY CONTACT PHONE NUMBER: _____

BY SIGNING THIS APPLICATION, I UNDERSTAND THAT EACH APPLICANT AND EACH TEAM POSITION ARE PRAYERFULLY CONSIDERED, AND I WILL CHEERFULLY SERVE IN ANY TEAM POSITION THAT IS ASKED OF ME.

SIGNATURE: _____ ***DATE:*** _____

***There is a fee to serve on team which covers your accommodations and meals for the weekend. This amount has not been determined for 2027. It was $190 for WALK #70 and will be close to that amount. Please do not send any money with your application. The team fee will be collected at team training meetings prior to the 71st WALK weekend.*

SUBMIT COMPLETED APPLICATION BY EMAIL TO:

KEITH METZEL (TEAM SELECTION COMMITTEE CHAIR)
sanctuarysound2015@gmail.com

OR BY MAILING TO:

KEITH METZEL
115 APRIL LANE
DALLASTOWN, PA 17313

If you have any questions, please feel free to reach out to either Dory Erb or Erin Slye.

Dory - dory721@aol.com or 484.684.0098
Erin – erinslye@gmail.com or 610.960.9042