

**EASTERN SHORE EMMAUS**  
APPLICATION TO ATTEND AND EMMAUS WEEKEND  
**TO BE COMPLETED BY THE APPLICANT**

Name \_\_\_\_\_ Name you like to be called \_\_\_\_\_

Mailing Address \_\_\_\_\_  
Street City State Zip

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Sex:  Male  Female Birth Date \_\_\_\_\_

E-Mail Address (optional): \_\_\_\_\_

Occupation \_\_\_\_\_

Has the Walk to Emmaus program and the Emmaus weekend been explained to you?  Yes  No

Has the importance of the "follow-up" programs (Fourth day, group reunions, etc.) been explained to you?  
 Yes  No

Marital Status \_\_\_\_\_ Spouse's first name \_\_\_\_\_

Has your spouse attended a weekend?  Yes  No

If **Yes**, where and when \_\_\_\_\_

If **No**, is your spouse a current applicant?  Yes  No

Has any other relative attended a weekend?  Yes  No If **Yes**, where and when:

How are you related and their name? \_\_\_\_\_

Are you on any special diet/medication? \_\_\_\_\_Yes \_\_\_\_\_ No If so, what?

Do you have any problems or physical handicap that may affect your attendance? \_\_\_\_\_Yes \_\_\_\_\_No

If **Yes** please specify

What size T-shirt do you wear? \_\_\_\_\_ What church  
do you attend?

Name: \_\_\_\_\_ Denomination: \_\_\_\_\_

Address: \_\_\_\_\_ Pastor: \_\_\_\_\_

Church Phone Number: \_\_\_\_\_

In what church activities are you involved?

Please give a brief, frank, statement about why you would like to attend and Emmaus weekend, what you expect from it, and anything about yourself and your faith you wish to share:

There is a \$50.00 application fee with this application. Please make checks payable to "Eastern Shore Emmaus". Any other expenses are being underwritten by gifts from individuals who have experienced a weekend and wish to share the experience with you. This is only an application. Notification of your acceptance for a weekend will be made by phone and a confirmation letter will be mailed prior to the weekend. If you do not attend two weekends after being notified of your acceptance your application fee is nonrefundable and a new application must be submitted. If you have any questions please feel free to ask your sponsor. When you have completed all areas of this application, please sign and return it (with your fee) to your sponsor for completion.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

Revised 09/25/2023

**EASTERN SHORE EMMAUS SPONSORSHIP**  
**TO BE COMPLETED BY THE SPONSOR**

**SPONSORS, PLEASE READ THE FOLLOWING STATEMENT CAREFULLY AND GIVE IT PRAYERFUL CONSIDERATION**

Sponsorship is a true form of agape and involves a tremendous responsibility. There is a \$50.00 application fee to be paid by the applicant, with \$150.00 remaining to be paid by the sponsor. There are two pages to be completed by the sponsor and two for the pilgrim. One of the responsibilities is to see that the **pilgrim/sponsor's application is completed fully.** Sponsor, please remember that the Weekend is an intense program of Christian study and spiritual growth and is not a retreat or a cure-all for persons who may be experiencing temporary problems. **Applicants should already be active in their Church and have a desire to deepen their faith and to become closer to Christ in their daily lives.** EMMAUS is a method of Christian renewal in the church. As you complete these questions, be mindful that your prayer and participation in the weekend's activities enhance the success of your applicant's weekend.

Sponsor's Name \_\_\_\_\_

Mailing Address \_\_\_\_\_  
Street City State Zip

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

E-Mail Address (optional): \_\_\_\_\_

Name of your church: \_\_\_\_\_ Do you  
attend this church regularly? \_\_\_\_Yes \_\_\_\_No

When and where did you attend the Walk to Emmaus/Cursillo/Chrysalis? \_\_\_\_\_

Have **you** been to a Day of Deeper Understanding? \_\_\_\_Yes \_\_\_\_No

Where and When? \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

Have you FULLY explained the Walk to Emmaus program and the Emmaus weekend to your applicant?  
\_\_\_\_Yes \_\_\_\_No

If the applicant is married have you FULLY discussed the weekend with the spouse? \_\_\_\_Yes \_\_\_\_No

Is the spouse also to attend? \_\_\_\_Yes \_\_\_\_No

If NO, please explain the circumstances:

Will you pray and sacrifice for your applicant? \_\_\_\_Yes \_\_\_\_No

Will you bring your applicant to the weekend? \_\_\_\_Yes \_\_\_\_No

Will you attend Sponsor's Hour, Candlelight, and Closing?  Yes  No

Will you assist your applicant in establishing a Reunion Group and/or similar group?  Yes  No

Will you bring your applicant to the Day of Deeper Understanding and first Gathering after the weekend?  
 Yes  No

Will you help your applicant learn about sponsors duties and responsibilities and assist your applicant with their first sponsorship?  Yes  No

If your answer to any of the above questions is NO, please name who will assist you with the fulfillment of those responsibilities.

To the best of your knowledge does your applicant have the physical and mental health to attend the Walk?  
 Yes  No

Is your applicant under any temporary emotional strain that might indicate that participation should be postponed to a later Walk?  Yes  No

Are there any additional circumstances concerning this applicant that the Team should be aware of and please give a brief statement about why you think your applicant should attend the Emmaus weekend.

**This is only an application. The \$50.00 application fee must be included, along with the application completed fully by the applicant and sponsor to be processed. If your applicant is asked to go on a weekend twice and dos not choose to go, their \$50.00 application fee is nonrefundable, and a new application must be completed with another application fee. If accepted the applicant will be notified by phone and then a letter will be sent to the applicant and to the sponsor.**

Date \_\_\_\_\_ Signature of Sponsor \_\_\_\_\_

**Please mail completed application to: Eastern Shore Emmaus - P. O. Box 91 - Franktown, VA 23354**

**For Administrative use only:**

Date application received \_\_\_\_\_

Spouse application received \_\_\_\_\_

Application fee attached: Yes / No Cash  Check  Date \_\_\_\_\_

Balance Due Cash  Check  Date \_\_\_\_\_

Accepted Yes / No Walk No. To Attend \_\_\_\_\_ L/S

\_\_\_\_\_