

Please use white paper, *print legibly*, use black ink pen, and answer ALL questions.

Print your full name _____

Prefer Name Tag to read _____ Birth Date _____

Mailing Address _____

Cell Phone () _____ Home Phone() _____

Email Address _____

Occupation _____

Male ___ Female ___ Married ___ Single ___ Widow ___ Divorced ___

REQUIRED Application MUST have your pastor's signature and phone number. If your church is currently without a Pastor, please have the Church's Lay Leader, Deacon, etc., sign with their position and telephone

Name of your Church _____ Telephone() _____

Address _____

Pastor's Signature _____

Pastor's Printed Name _____ Telephone() _____

Your original Walk # _____ When did you attend the Mandatory DODU? _____

Are you in a Reunion Group? No _____ Yes _____ Which one? _____

It is important you list any dietary needs so the staff is prepared for meals (vegetarian, diabetic, etc):

List any physical limitations: _____

TEAMING RESPONSIBILITIES : This application is a commitment to serve God. You will be expected to attend six (6) team meetings. Prior to committing to team, advise the weekend Lay Director if there is a reason you cannot attend ALL meetings. Team members are responsible for their portion of the room and board for the walk weekend. The current team fee is \$300.00 and is collected no later than the SECOND TEAM MEETING. If there is difficulty meeting this obligation, please contact the Lay Director of the weekend prior to the start date of the first team meeting.

By my signature below I give Emmaus of the Albemarle, Inc. permission to seek appropriate medical attention for me in the event of an accident, illness or injury during the Emmaus Weekend. I will personally be responsible for any and all costs associated with any medical treatment provided.

Applicant's signature _____ Date _____

Mail legible, fully completed, 2 page application to:

Team Fees may be included with your application. Thank you.

Emmaus of the Albemarle, Inc.
Team Selection
PO BOX 1700
Kitty Hawk, NC 27949

PREVIOUS TEAM EXPERIENCE

Is this your first time to team? _____

Please list your previous team experiences including jobs, talks, and readings. Identify by walk number

JOB POSITION	on which walks	TALKS & READINGS	on which walks
ASSISTANT TABLE LEADER		PRIORITIES	
TABLE LEADER		PRIESTHOOD OF BELIEVERS	
LAY DIRECTOR		LIFE OF PIETY	
ASSISTANT LAY DIRECTOR		GROW THROUGH STUDY	
SPIRITUAL DIRECTOR		CHRISTIAN ACTION	
ASSISTANT SPIRITUAL DIR.		DISCIPLESHIP	
MUSIC		CHANGING OUR WORLD	
BOARD REPRESENTATIVE		BODY OF CHRIST	
HEAD COORDINATOR		PERSEVERANCE	
ASSISTANT HEAD COORDINATOR		FOURTH DAY	
PRAYER CHAPEL COORDINATOR		PSALM 34 (PG 13)	
DINING ROOM		COLOSSIANS 3:1-14	
KITCHEN		DEATH TO LIFE (PG 10)	
CHAPEL		PSALM 30 (PG 13)	
AGAPE		JOSHUA 24:14-15	
SPEAKER SUPPORT		MATTHEW 22:34-40	
TALK ROOM		GREATEST COMMANDMENT PG 8	
PAST LAY DIRECTOR		WARM FUZZY	
FLOATER		EXPLAIN I AM	
		ECCLESIASTES 3:1-15	
		TIME FOR GOD (PG 9)	
		LORD, I HAVE TIME	
		EXPLAIN CLOTHESPIN AGAPE	
		PLEASE HEAR WHAT I'M NOT SAYING	
		PSALM 100	
		PSALM 23	
		PRAYER OF ST FRANCIS (PG 5)	
		WHO ME?	

Conference Room positions

Servant Team positions

Obsolete positions

Date Completed Application Received _____

Date Applicant Contacted to Team _____ Accepted _____ Declined _____

Date Team Fees Received _____ Amount \$ _____

Received _____

