EMMAUS OF THE ROCKIES - PILGRIM/SPONSOR APPLICATION

Women's Walk #186

October 3-6, 2024/Sky Ranch Horn Creek, Westcliffe, Colorado

TO BE COMPLETED BY THE PILGRIM (you may use the back if needed)

For use by Registrar: Date Application was received:

Date Pilgrim's Conformation Letter sent:

Pilgrim Name:(as you		l want in		Ü	ouck y necucu			
			Home Phone:			Email:		
Circle One: Mal					Married			
Spouse Name:			Has spouse a	ttended a walk	? Where:		When:	
Please list medication	ns:							
Do you have dietary r	estricti	ons/allerg	gies?Ex	plain:				
Do you require physic	cal assis	stance? _	Ex	plain:				
Are you able to use ar	ı upper	bunk? _	Spec	ial boarding ne	eds:			
Emergency Contact:_					Phon	ne #:		
Second Emergency C	ontact	not a relat	ive or Sponsor:			Phone #:		
Church you attend:Pastor:								
Address:								
Why do you want to a	ittend t	he Walk t	o Emmaus?					
Pilgrim's Signature:				Date:				
TO BE COMPLETE	ED BY	THE SPO	ONSOR (you	may use the	back if needed	()		
Sponsor's Name:								
Sponsor's Address:								
Cell Phone: Hon			Home Phone: _	ome Phone:Email:				
Walk attended?			(Community/#) Do you attend Gatherings:					
Reunion Group				Hov	long have you l	known your pil	grim?	
Why do you believe tl	his pers	son would	be a good pilgi	rim?				
Have you fully explai	ned the	Emmaus	program and w	eekend to you	r pilgrim?			
Will you PLEDGE to:								
Pray for your Pilgrim	?			_				
Care for your Pilgrim								
Attend pilgrim/comn	•		_					
Accompany your pilg Encourage and assist								
Encourage and assist	your p	11g11111 111 J	oming a Keume	ii Gioup: _				
Sponsor's Signature:						Date:		
		Make chec	Application Balance, if a ks payable to "En	ns Due Septeny, due Septenmaus of the Roo	eposit require mber 1, 2024. ember 15, 2022 ekies" or "EOTR," egs, Colorado 809	1 and submit to:		

Deposit \$_____ Check # _____ Balance paid \$____ Check # ____