EMMAUS OF THE ROCKIES - PILGRIM/SPONSOR APPLICATION Men's Walk, #188

Men's Walk, #188 October 9-12, 2025 Flagler, Colorado Cost \$250

TO BE COMPLETED BY THE PILGRIM (y	ou may use the bo	ack if needed)	
Pilgrim Name:(as you would want in on your n	ame tag)		
Pilgrim Mailing Address: Cell Phone: Date of Birth: Spouse Name: Has spouse			
Cell Phone: Home Phone:	Em	ail:	
Date of Birth: Occupation:	Circle One	e: Single Married	Divorced Widowed
Spouse Name: Has spouse Please list medications: Has spouse Do you have dietary restrictions/allergies? Do you require physical assistance? Exp Are you able to use an upper bunk? Special Emergency Contact: Phone and Second Emergency Contact not a relative or Spot Church you attend: Address:	attended a walk?	_Where:	_ When:
Please list medications:			
Do you have dietary restrictions/allergies?		Explain:	
Do you require physical assistance? Exp	lain:		
Are you able to use an upper bunk? Spe	ecial boarding needs:		
Emergency Contact: Phone 7	#:		
Second Emergency Contact not a relative or Spo	nsor:	Phone	#:
Church you attend:	Pastor: _		
Address:			
Why do you want to attend the Walk to Emmaus	s?		
Pilgrim's Signature:	Date:	_	
TO BE COMPLETED BY THE SPONSOR (you may use the b	ack if needed)	
Sponsor's Name: Sponsor's Name: Home Phone: (Community Walk attended? (Community Sponsor's Name:	or's Address:		
Cell Phone: Home Phone:	Email:		
Walk attended? (Communi	tv/#	Do you attend G	atherings:
Reunion Group He	ow long have you kno	wn vour nilgrim')
Why do you believe this person would be a good	nilgrim?	m your phomin	•
Why do you believe this person would be a good Have you fully explained the Emmaus program	and weekend to your	nilgrim?	
Trave you runy explained the Eliminaus program	and weekend to your	piigiiiii	
Will you PLEDGE to:			
Pray for your Pilgrim?			
Accompany your pilgrim's family during the weekend? Attend pilgrim/community functions throughout the weekend? Accompany your pilgrim to the Cothoring following the Wolls?			
Accompany your pilgrim to the Cathering follow	ring the Wells?		
Accompany your pilgrim to the Gathering following the Walk? Encourage and assist your pilgrim in joining a Reunion Group?			
Encourage and assist your prigram in joining a K	eumon Group:		
Sponsor's Signature: Da	te:		
Pilgrim Cost for Walk is \$250.00 Deadline for Applications for Balance, if any, due of Make Checks payable to Emm Emmaus of the Rockies, PO Box 64031, C	or Men's Walk Is S 30 days prior to sta aus of the Rockies	September 1, 20 art of Walk. s (EOTR) and m	025. nail to:
n w 1 n 1.			
For Use by Registrar:		~*	1
Date application was received: Date Pilgrim's confirmation letter sent:	Deposit \$	Che	eck #
Date Pilgrim's confirmation letter sent:	Balance p	aid \$ Che	eck #