

**EMMAUS OF THE ROCKIES - PILGRIM/SPONSOR APPLICATION**

**Men's Walk, #191  
March 19-22, 2026  
John Wesley Ranch, Divide, CO  
Cost \$280**

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

Pilgrim Name:(as you would want it on your name tag) \_\_\_\_\_

Pilgrim Full Mailing Address (including city, state and Zip code): \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Occupation: \_\_\_\_\_ Single  Married  Divorced  Widowed

Spouse Name: \_\_\_\_\_ Has spouse attended a walk? \_\_\_\_\_ Where: \_\_\_\_\_ When: \_\_\_\_\_

Please list medications: \_\_\_\_\_

Do you have dietary restrictions/allergies? \_\_\_\_\_ Explain: \_\_\_\_\_

Do you require physical assistance? \_\_\_\_\_ Explain: \_\_\_\_\_

Are you able to use an upper bunk? \_\_\_\_\_ Special boarding needs: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

Second Emergency Contact not a relative or Sponsor: \_\_\_\_\_ Phone #: \_\_\_\_\_

Church you attend: \_\_\_\_\_ Pastor: \_\_\_\_\_

Full Mailing Address: \_\_\_\_\_

Why do you want to attend the Walk to Emmaus? \_\_\_\_\_

Pilgrim's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

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

Sponsor's full mailing address: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Walk attended? \_\_\_\_\_ (Community/# \_\_\_\_\_) Do you attend Gatherings: \_\_\_\_\_

Reunion Group \_\_\_\_\_ How long have you known your pilgrim? \_\_\_\_\_

Why do you believe this person would be a good pilgrim? \_\_\_\_\_

Have you fully explained the Emmaus program and weekend to your pilgrim? \_\_\_\_\_

Will you PLEDGE to:

Pray for your Pilgrim? \_\_\_\_\_

Care for your Pilgrim's family during the weekend? \_\_\_\_\_

Attend pilgrim/community functions throughout the weekend? \_\_\_\_\_

Accompany your pilgrim to the Gathering following the Walk? \_\_\_\_\_

Encourage and assist your pilgrim in joining a Reunion Group? \_\_\_\_\_

Sponsor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Pilgrim Cost for Walk is \$280.00, \$50 deposit required with Application.**

**Deadline for Applications for Walk Is February 19, 2026.**

**Balance, if any, due 30 days prior to start of Walk.**

**Make Checks payable to Emmaus of the Rockies (EOTR) and mail to:**

**Emmaus of the Rockies, PO Box 64031, Colorado Springs, CO 80962-4031, Attn: Registrar**

**For Use by Registrar:**

**Date application was received: \_\_\_\_\_ Deposit \$ \_\_\_\_\_ Check # \_\_\_\_\_**

**Date Pilgrim's confirmation letter sent: \_\_\_\_\_ Balance paid \$ \_\_\_\_\_ Check # \_\_\_\_\_**

**Date Sponsor's letter sent: \_\_\_\_\_**