

Sponsor Application

(Do NOT give this sheet to the Pilgrim)
Request for Reservation for a Walk to Emmaus | Please print or type.

	Walk Dates (Men): Walk [Dates (Women):	
1.	Sponsor's Name:		
2.	Address:		
3.	Email: Phone:		
4.	Pilgrim's Name:		
5.	Pilgrim's Address:		
6.	Pilgrim's Phone Number/Email:		
7.	Place of Sponsor's Walk to Emmaus:	Date:	
8.	Sponsor's Church Affiliation:		
9.	Are you in a reunion group? Yes No		
10.	Have you sponsored Pilgrims in the past? Yes	_ No	
11.	Are you praying and sacrificing for this Pilgrim? Yes	No	
12.	How long have you known this Pilgrim?		
13.	Why do you feel that this Pilgrim would benefit from	a Walk to Emmaus?	
14.	List any special requirements or preparations needs	ed to accommodate this Pilgrim:	
15.	Is the Pilgrim under any temporary emotional strain should be postponed? Yes No	that might indicate their Walk to Emmaus	
16	Are you able and willing to assist the Pilgrim in finding	ard and detting involved in a reunion group?	
10.	YesNo	ig and getting involved in a redinion group:	
17	If the Pilgrim is married, have you discussed the Walk to Emmaus with their Spouse?		
17.	Yes No	ik to Emmads with their opedso.	
18	Will you bring the Pilgrim to send off? Yes No		
	Will you attend Sponsor's Hour? Yes No		
	Will you attend the Candlelight Service? Yes		
	Will you attend closing? Yes No		
	Can you care for the needs of the Pilgrim's family du	ring the Walk? Yes No	
	Can you refrain from personal contact with your Pilg	_	
	Is there anything you are aware of that the Team sho	-	
	Pilgrim? Yes No If yes, please explain:		
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nen	the Pilgrim application is complete/returned to y back.	ou, please complete the Pilgrim Profile on the	
pons	sor Signature:	Date:	

Upon completion, send both applications, along with a non-refundable sponsor fee of \$175, and the applicant fee to PO Box 16214, Bristol, VA 24209.

Make checks payable to: Highlands Emmaus Community or pay online (preferred method).

Pilgrim's Profile	
(from Pilgrim's Application)	:
Age:	
Male/Female:	_
Marital Status:	_
Occupation:	_
Special Diet:	_
	_
Medications:	_
	_
Hobbies:	_
	_
Interests:	_
	_