



WALK TO  
EMMAUS  
THE UPPER ROOM®

### PILGRIM APPLICATION

- ALL PORTIONS AND PAYMENT IN FULL ARE REQUIRED BEFORE APPLICATION CAN BE PROCESSED
- THE PILGRIM, SPONSOR, AND PASTOR MUST COMPLETE AND SIGN THEIR RESPECTIVE SECTIONS
- PILGRIM CANDIDATES WITH INCOMPLETE APPLICATIONS WILL BE PLACED ON THE WAITING LIST AND THEIR PAPERWORK RETURNED UNTIL A COMPLETE APPLICATION, INCLUDING FULL PAYMENT, IS RECEIVED
- RETURN THE COMPLETED FORM TO YOUR SPONSOR, SO THEY MAY FILL IN THEIR SECTION
- CONFIRM WITH THE SWTX KOINONIA REGISTRAR THAT YOUR APPLICATION HAS BEEN RECEIVED AND IS COMPLETE

#### PLEASE CHECK WITH THE SWTX KOINONIA REGISTRAR FOR PAYMENT AND SCHOLARSHIP INFORMATION.

**Walk#** \_\_\_\_\_ **Date** \_\_\_\_\_ **Cost \$** \_\_\_\_\_ **Location** \_\_\_\_\_

\*If you are put on the wait list, can you attend on short notice? ☐ 1 Week ☐ 3 – 4 Days ☐ Less than 3 days\*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Name Tag: \_\_\_\_\_

☐ Male ☐ Female Date of Birth: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell/Other: \_\_\_\_\_

Church Name & Address presently attending: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Number of Children: \_\_\_\_\_ Do you smoke? ☐ Yes ☐ No

Ordained Clergy? ☐ Yes ☐ No Occupation: \_\_\_\_\_

Has the Walk been fully explained to you? ☐ Yes ☐ No Has Post-Walk follow up been explained? ☐ Yes ☐ No

Name of local Emmaus Community for Post Walk gatherings that you will be attending (check with your sponsor if unclear what the name is): \_\_\_\_\_

Do you have any Special Dietary needs? ☐ Yes\* ☐ No

**If YES\* Please explain:** \_\_\_\_\_

Do you have any special health problems or physical needs? ☐ Yes\* ☐ No

**If YES\* Please explain:** \_\_\_\_\_

#### REGISTRATION CANCELLATION/CHANGE/REFUND POLICY:

All changes (changes in information, walk dates, cancellations or requests for a refund) in Walk Registration must be submitted to the SWTX Koinonia Registrar in writing (by email/fax/mail). Registration fees can be transferred in full to another event or pilgrim before the cancellation deadline. Full refunds may be issued to the payer of the registration fee minus a \$25 processing fee.

**Pilgrim Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Mail completed  
Application Packet to:**

Debbie Pruett, Registrar

P.O. Box 2068, Lytle, Texas 78052

**Make Check Payable to:**

Southwest Texas Koinonia

Pilgrim's Name: \_\_\_\_\_

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\*\*\*CLERGY INFORMATION\*\*\*

(See #2 Instructions)

Your Pastor's Name: \_\_\_\_\_ Church Name & Address: \_\_\_\_\_

Your Pastor's Signature: \_\_\_\_\_

Have you attended Emmaus, Cursillo, Tres Dias or any other recognized 3-day Weekend? ☐ Yes # \_\_\_\_\_ ☐ No

\*\*\*SPONSORS INFORMATION\*\*\*

(See Instructions on Page #3)

Sponsorship is the most important job in Emmaus. The quality of sponsorship influences the pilgrim, the health of the Emmaus movement, and the Church in which the Pilgrim will serve. Thank you for your dedication and effort to promote the Emmaus vision of developing Christian leaders who will strengthen the local Church. It is important for the success of this Pilgrim's Walk for you to be a fully participating Sponsor. *If you cannot answer YES to all of the following, then please reconsider whether you are best suited to act as this applicant's Sponsor.*

Where did you attend your Emmaus/Cursillo (or other recognized 3-day experience)? \_\_\_\_\_

When? \_\_\_\_\_ Walk# \_\_\_\_\_

☐ Yes ☐ No Are you in a reunion group?  
(If not active in a reunion or accountability group, please make every effort to join one soon. This is an essential part of the weekend experience.)

☐ Yes ☐ No Are you active in your local Church?

☐ Yes ☐ No Are you praying for your candidate?

☐ Yes ☐ No Will you personally bring your candidate to the Emmaus site on Thursday night?

☐ Yes ☐ No Will you care for the needs of your candidate's family? (Ex: Mow the lawn, help with emergency tasks, offer childcare, help the family get to church, etc.?)

☐ Yes ☐ No If the candidate is married, have you discussed the Walk with their spouse?

☐ Yes ☐ No Have you informed the candidate and spouse that they should expect to have no contact during the weekend, except in case of emergency?

☐ Yes ☐ No Has candidate suffered from a loss (death, divorce, etc.) this past year?

☐ Yes ☐ No Is the candidate emotionally ready to attend?

☐ Yes ☐ No Are you able and willing to assist the candidate to get into a reunion group?

☐ Yes ☐ No Have you explained the post-Walk follow-up meeting?

☐ Yes ☐ No Will you bring agape food & gifts?

☐ Yes ☐ No Can you fulfill Sponsor responsibilities if your candidate attends on short notice?

As Sponsor you are responsible to participate in these events. Please indicate the events you will attend.

☐ Registration ☐ Sponsor's Hour ☐ Worship  
☐ Closing ☐ Follow-up Meeting ☐ First Gathering

**PLEASE PRINT:** ☐ Please check if this is a new address

Sponsor's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell/Other: \_\_\_\_\_

Email Address: \_\_\_\_\_

How long have you known this candidate? \_\_\_\_\_ Is this candidate active in their local Church? \_\_\_\_\_

If you were on the team would you be encouraged to have this person as a candidate? \_\_\_\_\_

What characteristics does the candidate demonstrate that exhibits his/her commitment to Christ? \_\_\_\_\_

To **your** knowledge, does this candidate have an addiction that would prevent full participation? ☐ Yes ☐ No

\*\*\*If answered 'yes' to the last question, it is advisable to wait to sponsor this candidate until the issues are resolved.\*\*\*

**As a sponsor, I say YES to Christ. I will fulfill my responsibilities in such a way that His grace and love are revealed to this candidate through my Christian Action. My signature on this application indicates my commitment to the high calling of servanthood.**

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

**INSTRUCTIONS FOR COMPLETION OF THE  
WALK TO EMMAUS PILGRIM APPLICATION**

Please take special note of the following questions on this Pilgrim Application. All information must be complete.

**INFORMATION REGARDING YOUR CHURCH MEMBERSHIP**

Because Emmaus is not intended to make disciples, but rather strengthen those who are already disciples, persons accepted for a Walk to Emmaus are expected to be **ACTIVE** members of a Christian congregation. **ALL EXCEPTIONS TO THIS POLICY** must be approved in advance by the Community's Spiritual Director. Please make note of this before you submit your application; otherwise the packet may be returned.

Persons who are members of one congregation but are actively attending another congregation should reconcile the issue of where God is calling them to service and make a commitment to one community before applying for Walk to Emmaus. This enables the Pilgrim to participate **FULLY** in that community upon their return from the Walk to Emmaus.

**HAS THE WALK TO EMMAUS BEEN EXPLAINED TO YOU?** Make sure you are fully aware of what the Walk to Emmaus is all about. If you have questions, ask your Sponsor for more information. Your Sponsor should not sign this form until he/she has explained Emmaus and the events after the Walk weekend to you and, if applicable, your significant other.

**IF THE WALK IS CANCELLED OR PILGRIM CANNOT ATTEND**, the Sponsor, Pilgrim and/or Lay Director may (a) request a refund or (b) request for a transfer to a future Emmaus Walk. If the pilgrim is paid in full and the application is on file, you will not need to submit a new application. Requests for a transfer or a refund must be made in **WRITING** either through email, fax or regular mail to the SWTX Koinonia Registrar. Refunds are issued to the original payer.

**INFORMATION ON SPECIAL NEEDS.** It is especially important to know if you have any special needs or challenges. It is rare that any such need cannot be met; however, we must know in advance to prepare for your full participation in the Walk to Emmaus activities. Please let us know as far in advance as possible. **NONE OF THIS INFORMATION WILL BE RELEASED EXCEPT TO THOSE RESPONSIBLE FOR MEETING YOUR PHYSICAL, MEDICAL OR DIETARY NEEDS.**

**SIGNATURES REQUIRED ON THE FORM.** There are three **(3)** signatures that are **REQUIRED** for reservation. All three need to be present or the form will be returned for completion, which may result in a delay of your registration. **IT IS THE RESPONSIBILITY OF THE SPONSOR TO SEE THAT ALL THREE SIGNATURES ARE PRESENT!**

**1. YOUR SIGNATURE** – This is your free commitment to accept God's invitation to attend the Walk to Emmaus.

Therefore, the form must be signed by you personally - not your sponsor, spouse, friend, or parent (they cannot make such a free commitment for you).

**2. YOUR PASTOR'S SIGNATURE** – This signature is the commitment of the clergy member of the congregation that you serve and worship in to work with you in developing your service to God after the Walk. The Clergy member does not have to have been on a walk him/herself; however, the Walk is not intended to bypass or usurp the authority of the pastor of your congregation in any way. If your pastor is opposed to your attending a Walk, it will be difficult for you to serve effectively in your church after your Walk and you may feel frustrated and discouraged. Your Sponsor or the Spiritual Director of the Fourth Day Group or of the Community may contact the clergy member if he/she is hesitant or uncertain. **IT IS MEANINGLESS TO HAVE ANY MINISTER OTHER THAN YOUR OWN SIGN THIS FORM, SINCE THAT WOULD COMPLETELY DEFEAT THE PURPOSE OF THE PASTOR'S SIGNATURE.**

**3. YOUR SPONSOR SIGNATURE** – This is your sponsor's commitment to both you and to the Emmaus Community - that he/she is willing to help you prepare for your walk, care for your family while you are away, and help you become more active in service after the Walk weekend. This signature emphasizes the great importance the Walk to Emmaus places on your sponsor.