



WALK TO EMMAUS

THE UPPER ROOM®

Southwest Texas Koinonia Emmaus Community

LAY TEAM SERVICE FORM

PERSONAL INFORMATION

Name: _____

Gender: ☐ Male ☐ Female

Address: _____

Telephone: Home () _____

City/State/Zip _____

Work () _____

E-mail _____

Cell () _____

I was a pilgrim/butterfly on: ☐ Emmaus Walk # _____ Chrysalis Flight/Journey # _____

Birth Date (optional for Emmaus, but required for Chrysalis): _____

CHURCH/FOURTH DAY GROUP INFORMATION

Emmaus is for the development of Christian leaders. Participation as a current and active member in a Christian congregation is necessary to the fulfillment of this purpose. The Southwest Texas Koinonia Emmaus Community exists to provide leadership opportunities through the hosting and support of Emmaus events.

Church Home: _____

Denomination: _____

Are you active in your Local Emmaus Community Gatherings?

☐ Yes ☐ No

Local Emmaus Community: _____

REUNION/ACCOUNTABILITY GROUP INFORMATION

Are you active in a weekly Reunion Group? ☐ Yes ☐ No Reunion Group: _____

PHYSICAL/DIETARY INFORMATION

Do you have specific dietary needs? ☐ Yes ☐ No Describe: _____

Do you have specific physical needs? ☐ Yes ☐ No Describe: _____

Do you have specific medical needs? ☐ Yes ☐ No Describe: _____

Smoker? ☐ Yes ☐ No

APPLICATION INFORMATION

I would like to serve on a team in the following capacity:

☐ Outside Support ☐ Prayer Team ☐ Conference Room ☐ Music Team

☐ Please place me on track to eventually serve as a Walk Lay Director

Music Team Applicants: ☐ Singer ☐ Instrument(s): _____

Medical Professionals: Occupation and Title: _____

The Team Selection Committee is charged with maintaining a balance of experience on each Emmaus Team. Please fill out as completely as possible. Use additional pages as necessary.

<input type="checkbox"/> Emmaus	Number _____	Position _____
<input type="checkbox"/> Chrysalis	Date _____	Talk Given _____
<input type="checkbox"/> Kairos	Location _____	Lay Director _____
<input type="checkbox"/> Emmaus	Number _____	Position _____
<input type="checkbox"/> Chrysalis	Date _____	Talk Given _____
<input type="checkbox"/> Kairos	Location _____	Lay Director _____
<input type="checkbox"/> Emmaus	Number _____	Position _____
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<input type="checkbox"/> Emmaus	Number _____	Position _____
<input type="checkbox"/> Chrysalis	Date _____	Talk Given _____
<input type="checkbox"/> Kairos	Location _____	Lay Director _____
<input type="checkbox"/> Emmaus	Number _____	Position _____
<input type="checkbox"/> Chrysalis	Date _____	Talk Given _____
<input type="checkbox"/> Kairos	Location _____	Lay Director _____

RECOMMENDATIONS

As the Lay Director of the Southwest Texas Koinonia Community, I recommend this applicant to serve on an Emmaus Team.

Signed: _____ Date: _____

As the Pastor of this applicant, or Spiritual Director of the Southwest Texas Koinonia Community, I recommend this applicant to serve on an Emmaus Team.

Signed: _____ Date: _____

If accepted to serve as a TEAM MEMBER, I commit to attending all Team Meetings and to be present for the entire weekend, including closing. I also agree, in a spirit of love and obedience, to follow the guidelines for Team Service as outlined in the Team Manual and as directed by the Southwest Texas Koinonia Emmaus Community Board through its representative, the Lay Director of the weekend.

Signed: _____ Date: _____

Submit this form to the Southwest Texas Koinonia Community Walk Lay Director or Outside Team Coordinator