Name of Candidate	Church
Name of Sponsor	Church
Depo	osit
Bala	ncedue at registration
	SOUTHERN NEW ENGLAND WALK TO EMMAUS Γ FOR RESERVATION – Walk #
TO BE FILLED OUT BY	<u>THE CANDIDATE</u> : (Please <u>print clearly</u>)
PERSONAL INFORMATI Name or nickname to be writ	ON tten on name tag
Address	
City	StateZip
Phone	Email
Date of Birth	Present Age Gender
Marital Status: Married	Single Divorced Widowed Separated
Name of spouse:	Will spouse attend this Walk? Yes No
Number of children	
Present Occupation	
If retired, what was your occu	upation?
Level of education:	
Walk to Emmaus? Yes]	n or physical handicap that may affect your attendance at the No
Are you allergic to any foods	? If so, explain
Special diet? Yes No If	so, explain
Are you on medications? Yes their original containers	s No PLEASE remember to bring all medications in

CHURCH INFORMATION

Signature_____

All the above information is necessary for your proper placement in the Walk to Emmaus. Please fill in <u>all the blanks</u>. Enclose a pre-registration deposit of \$75.00. This will be applied toward your total cost of \$225.00 which partially offsets the expenses of your weekend. *This deposit may be refunded up until two weeks before your Walk*. *After that date, there will be no refunds*. Make checks payable to **SNE Emmaus**. You will be informed of your acceptance for the Walk by the registrar. Thank You.

PLEASE RETURN THIS APPLICATION TO YOUR SPONSOR

ne of Sponsor	Church_	
ne of Candidate	Church_	
TO BE FILLED OUT BY THE	E SPONSOR: Walk #	_
SPONSOR INFORMATION		
Address		
City	State	Zip
Phone# Home	Work	
Email address:		
Name & Denomination of church	n now attending:	
Do you attend church regularly?		
Where did you make your Emma	uus/ Cursillo/ Chrysalis?	
Walk or Flight # W	Vhen?	
Are you now part of a reunion/Er	mmaus group?	
How many candidates have you s	sponsored in the last year?	
Are you praying and sacrificing f	for your candidate?	
How long have you known the ca Why do you feel this person wou	andidate? Ild be a good candidate?	
	sical and mental health needed	

Is	the	candidate	under	any	temporary	emotional	strain	that	might	indicate	his/her
we	eeker	nd should b	e postp	oned	?						
E	xplai	n									

Are you able and willing to assist the candidate to get into an Emmaus Group?_____

If the candidate is married, have you discussed the weekend with his/her spouse?

Is the candidate's spouse also attending this Walk to Emmaus? _____?

\checkmark	Will you bring your candidate to the Emmaus site?	Yes	No
\checkmark	Attend sponsor hour?	Yes	No
\checkmark	Candlelight?	Yes	No
\checkmark	Closing?	Yes	No
\checkmark	Can you care for the needs of the candidate's		
	Spouse /family over the weekend?	Yes	No
✓	Have you explained the post-weekend meeting?	Yes	No
\checkmark	Are you aware of the importance of		
	minimal contact with your candidate during the		
	weekend, especially if the candidate is your own spouse?	Yes	No

Please explain any of the questions above that you answered with a "No".

Sponsor's Signature _____

MAIL THIS FORM WITH THE CANDIDATE'S "REQUEST FOR RESERVATION" FORM AND A \$75 DEPOSIT TO: SNE Emmaus, P.O. Box 461, Wakefield, RI 02880

Make the check out to SNE Emmaus

As part of your sacrifice, would you offer \$25.00 toward general scholarship funds?