

# GRACE EMMAUS of SILICON VALLEY



For the Development  
of Christian Leaders

## TO BE FILLED OUT BY THE APPLICANT:

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ EMERGENCY PHONE: ( ) \_\_\_\_\_

EMAIL: \_\_\_\_\_ Your age: \_\_\_\_\_

Name you want on your name tag: \_\_\_\_\_

Gender: M F Marital Status (circle one): M S D W SEP Number of Children: \_\_\_\_\_

Are you on a special diet? \_\_\_\_\_ Describe \_\_\_\_\_

Special diets are medically prescribed/ allergies / vegetarian / etc.

Do you take special medications? \_\_\_\_\_

Do you have health needs or a physical handicap that may affect your attendance at a Walk to Emmaus? \_\_\_\_\_ If yes, please specify: \_\_\_\_\_

Education or training: \_\_\_\_\_

What is your present occupation? \_\_\_\_\_

**\*\*NAME AND PHONE NUMBER OF NEAREST RELATIVE NOT LIVING WITH YOU:**

( )

NAME

PHONE NUMBER

Name and denomination of church you attend: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_

In what church activities are you active? \_\_\_\_\_

Has the "Walk to Emmaus" been explained to you? \_\_\_\_\_

Have the activities of the Emmaus Community been explained to you? \_\_\_\_\_

State briefly why you wish to be involved in the Emmaus Community and what you expect from it:

I release Grace Emmaus of Silicon Valley and its volunteers, agents and Board of Directors and the host church from any and all liability for and waive any and all claims for injury, loss or damage in any way connected with my participation in Grace Emmaus Of Silicon Valley activities or programs.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

*Please fill in all the blanks. Return to your sponsor*



TO BE FILLED OUT BY THE SPONSOR:

PILGRIN NAME \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ WORK: ( ) \_\_\_\_\_ CELL: ( ) \_\_\_\_\_

EMAIL: \_\_\_\_\_

Date of the Walk for which you wish to register your Pilgrim? \_\_\_\_\_

Are you in a reunion/small group? \_\_\_\_\_

Name and denomination of the church you attend: \_\_\_\_\_

Do you attend regularly? \_\_\_\_\_ Where did you make your Walk/Cursillo? \_\_\_\_\_ When? \_\_\_\_\_

How many Pilgrims have you sponsored in the past? \_\_\_\_\_

How long have you known this Pilgrim? \_\_\_\_\_ Are you praying and sacrificing for your Pilgrim? \_\_\_\_\_

Why do you want to sponsor this person? \_\_\_\_\_

Is this person under any temporary emotional strain or have a physical condition that might indicate his/her weekend should be postponed? \_\_\_\_\_

Are you able and willing to assist the Pilgrim to get into an Emmaus Reunion Group? \_\_\_\_\_

If the Pilgrim is married, have you discussed the Walk to Emmaus with his/her spouse and are in the process of sponsoring him/her also? \_\_\_\_\_ If not, why? \_\_\_\_\_

Please list how you would like the community to be praying for your pilgrim \_\_\_\_\_

Signature of Sponsor(s): \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

**SPONSOR:**

Print this page, completely fill it in, obtain signatures, and mail with the registration fee. \$35 per Pilgrim if received by early registration date or \$45 if received later.

Make *checks payable* to **Grace Emmaus of Silicon Valley**. Electronic registration can be used for temporarily holding a place, but the signatures & check must still be sent.

Registration is complete only after this form (completely filled-in) and check are mailed and received. The Grace Emmaus of Silicon Valley website is: [http:// www.gracewte.org](http://www.gracewte.org)

**MAIL TO: Cynthia Van Laar, 8549 Silvia St., Gilroy CA 95020  
408-846-2843 cynthia\_vanlaar@yahoo.com**