



(Rev. 3-25-08)

GFWTE PILGRIM APPLICATION

APPLICANT INFORMATION One Application Per Person

This is only an application. Notification of your assigned weekend will be made by mail. After you have completed your part of this application, please give it to your sponsor. All information will be kept confidential. Incomplete applications will be returned.

PLEASE PRINT CLEARLY

Name _____ Name you wish on your name tag _____
 Address _____ City _____ St _____ Zip _____
 Home Ph (____) _____ Bus Ph (____) _____ Cell Ph (____) _____
 Age _____ Marital Status _____ Sex _____ E-mail _____
 Your Church _____ Member _____ Visiting _____
 Occupation _____ Spouse Name _____
 Is your spouse applying to attend the "adjacent" walk? _____ Has your spouse already attended a walk? _____
 Applicant Signature _____ Date _____

Fall 2008 Foothills Walk To Emmaus Weekend Dates

Men's Walk #14 Women's Walk #14
 Sep 25-28, 2008 Oct 2-5, 2008

Check these dates carefully, then circle the weekends of your choice. Married couples should attend consecutive weekends. If you cancel less than 10 days prior to your assigned walk, it will be necessary to reapply.

MEDICAL INFORMATION / SPECIAL NEEDS

Please list any special needs or concerns such as medical allergies, medications taken, medical problems, dietary needs, food allergies, or other pertinent information: _____

Name of a relative not living with you _____

Relationship _____ Ph (____) _____

APPLICANT'S PASTOR INFORMATION

Pastor Signature _____ Church _____ Date _____

SPONSOR INFORMATION

EMMAUS is a method of Christian renewal in the church. Individuals recommended for Emmaus should be currently active in a local church and have a desire to deepen their faith and become closer to Christ in their discipleship. As a sponsor, you are required to provide information to the applicant to assist him/her in the decision to attend a weekend, to help him/her enter fully into the Emmaus fellowship after the weekend, to provide prayer and other support, and to provide transportation to and from the camp. Please be sure to encourage BOTH husband & wife to attend Emmaus and make sure all Pilgrim information is provided.

Sponsor Name _____ Signature _____
 Address _____ City _____ St _____ Zip _____
 Home Ph (____) _____ Bus Ph (____) _____ Cell Ph (____) _____
 Your Church _____ Member _____ Visiting _____
 E-mail _____ Emmaus "type" movement you attended _____

COMPLETED APPLICATIONS

Please check one:
 _____ \$75.00 enclosed (required with application to hold seat). Balance
 of \$75.00 due at registration prior to Send Off
 _____ \$150.00 enclosed (paid in full)

SPONSOR - Mail completed application to:
 GFWTE - REGISTRATION
 3184 S. Chestatee St.
 Dahlonega, GA 30533