

Campbellsville Chrysalis

APPLICATION for Flight # _____ Date: _____



Please fill all blanks of application (with 'N/A' if necessary).

TO BE COMPLETED BY THE CANDIDATE

(Please provide all information requested or it could delay your acceptance.)

PLEASE PRINT

Candidate Name: _____ Age: _____ Gender: M ___ F ___

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ **T-SHIRT SIZE** _____

Cell Phone: _____ Employer: _____

Email Address: _____ **<MUST HAVE- THIS IS HOW YOU WILL BE INVITED**

Parent's Name: _____

School: _____ Grade: _____

Full Name as you wish it to appear on your Name Tag: _____

Do you have **medically necessary** dietary needs that the kitchen needs to plan for? **YES** ___ **NO** ___ **We do not provide diet menus such as Low Fat, Low Carb etc. unless it is medically necessary.** If yes, what?

Do you have health problems, allergies or physical handicaps that may affect your attendance at the Chrysalis?

YES ___ **NO** ___ If yes, what? _____

Are you on special medication that the Chrysalis leaders need to monitor for you? **YES** ___ **NO** ___ If yes, what?

When? _____

NAME OF CHURCH ATTENDING: _____

Pastor's Name: _____

In what religious or community organizations are you active? _____

What extracurricular activities are you involved in? _____

I INTEND TO BE PRESENT FOR THE ENTIRE Chrysalis. (Thu 6:30pm – Sun 4:40pm)

Candidate's Signature: _____ **Date:** _____

REGISTRAR USE ONLY

Date deposit recd: _____ Check No: _____ Check amount: _____

Name of check owner: _____

Sponsor - _____ Sponsor - _____ Candidate - _____

app rcvd: _____ confirmation sent: _____ confirmation sent: _____

YOUR T-SHIRT SIZE: _____ **SPONSOR'S NAME:** _____

PARENTAL SIGNATURE REQUIRED FOR CHRYSALIS: _____

EMERGENCY CONTACT INFORMATION

Campbellsville Chrysalis

List family members or friends, other than your sponsor, who may be contacted in case of a medical emergency. We do not anticipate such an emergency will occur, however we must be prepared.

Contact#1: Name _____ Phone (____) _____
Address _____ City, State Zip _____
Relationship _____

Contact#2: Name _____ Phone (____) _____
Address _____ City, State Zip _____
Relationship _____

Contact#3: Name _____ Phone (____) _____
Address _____ City, State Zip _____
Relationship _____

Sponsor Name _____
Phone number where sponsor can be reached **during** walk _____

CANDIDATE MEDICAL RELEASE FORM

Campbellsville Chrysalis

(PLEASE PRINT, EXCEPT FOR SIGNATURE)

I, _____ consent to any necessary examination, anesthetic, medical diagnosis, surgery, or treatment and/or hospital care rendered to me under the general or special supervision and on the advice of any physician or surgeon licensed to practice medicine by the state in which they practice, during the duration of the trip identified below.

Campbellsville Chrysalis Flight# _____ DATE OF FLIGHT _____
Participant's Physician _____ PHONE _____
Allergies _____
Medications _____
Participant's Medical Insurance _____
Carrier's Telephone # _____ Policy # _____

Signature of Participant _____ Date _____

ALL PERSONAL INFORMATION IS KEPT CONFIDENTIAL BY THE Campbellsville EMMAUS BOARD MEMBERS - NO INFORMATION WILL BE SHARED UNLESS REQUIRED IN AN EMERGENCY OR LEGAL OCCURANCE.

Campbellsville Emmaus cannot be responsible for lost or stolen valuables (jewelry, money, etc.). Please do not bring valuables such as pagers, mobile phones or more cash than what is necessary to pay for the weekend or to purchase items from the book table.

Send completed application to: wooldridgejc@gmail.com

or mail to: Campbellsville Emmaus Community Inc.

Attn: Registrar, PO Box 4155, Campbellsville, KY 42719

Candidate's Name (just in case pages get separated): _____



TO BE FILLED OUT BY SPONSOR

Please fill all blanks and return to Registrar along with candidates Application, Deposit and Medical Release form/ Emergency Contact page. Make a copy of the Medical Release Form/Emergency Contact page as a resource for agape letters.

NAME: _____ HOME PHONE # _____

ADDRESS: _____ WORK PHONE # _____

CITY: _____ CELL PHONE # _____

STATE: _____ ZIP: _____ EMAIL: _____

WHERE YOU ATTEND CHURCH: _____

PASTOR: _____

ARE YOU IN A REUNION GROUP? ____ YES ____ NO NAME OF YOUR GROUP: _____

HOW MANY CANDIDATES HAVE YOU SPONSORED IN THE LAST MONTHS? _____ HOW LONG HAVE YOU KNOWN

THE CANDIDATE? _____ ARE YOU PRAYING AND SACRIFICING FOR YOUR CANDIDATE? _____

WHY DO YOU FEEL THAT THIS PERSON WOULD BE A GOOD CANDIDATE? _____

The candidate (**is/is not**) physically able to participate in an Emmaus Weekend. The candidate (**is/is not**) under any temporary emotional strain that might indicate his/her weekend should be postponed. I know this applicant (**is/is not**) an **active** member of their local church.

Name of applicant's local church: _____

I (**have/have not**) read the **Questions & Checklist** (pages 4, 5, 6 & 7 of this kit).

Will you assist the candidate to get into a reunion group? ____ YES ____ NO

If the candidate is married, have you discussed Emmaus with her/his spouse? ____ YES ____ NO

Will you bring your candidate to the Walk on time (6:30 p.m. Thursday)? ____ YES ____ NO

Chrysalis send off is different – BE AWARE OF THE DIFFERENCE FOR CHRYSALIS

Will you attend: Sponsor's Hour? ____ YES ____ NO Saturday Night Candlelight? ____ YES ____ NO Closing? ____ YES ____ NO

Can you care for the needs of your candidate's family over the weekend? ____ YES ____ NO

Are you aware of the importance of minimal contact with your candidate during the weekend, especially if the candidate is your wife/husband? ____ YES ____ NO

It is the Board's desire that each Pilgrim, Sponsor or Home Church pay the Pilgrim's Fee. Payments toward the cost can be made prior to walk time. The entire amount of fee is to be paid upon registration for Pilgrim to attend walk. Be sure your Pilgrim/Butterfly T-shirt size is listed on their application.

PARENTAL SIGNATURE REQUIRED FOR CHRYSALIS APPLICANTS ON THEIR APPLICATION.

\$100.00 TOTAL MUST BE PAID AT REGISTRATION TO ATTEND CHRYSALIS WALK.

Sponsor's Signature: _____ Date: _____

Send completed application to: wooldridgejc@gmail.com

or mail to: Campbellsville Emmaus Community Inc.

Attn: Registrar, PO Box 4155, Campbellsville, KY 42719

DO NOT RETURN THE FOLLOWING PAGES WITH APP:

THE FOLLOWING ARE FOR **EDUCATIONAL** AND **CHECK OFF LIST** FOR THE SPONSORS:

SOME QUESTIONS FOR PROSPECTIVE SPONSORS

1. **Why do you want to be a sponsor?** Do you want to build up the body of Christ by inviting people to participate in the Emmaus experience? Sponsorship is probably the most important role you will play in the Emmaus Community. Your invitation to a candidate is the first step on the **Walk to Emmaus**. To the candidate, you as the sponsor are the Emmaus Community and, as such, should walk with the candidate all the way to Emmaus and back.
2. **Who should you invite to participate in the Walk to Emmaus?** Emmaus is for active Christian's who, through their personal renewal, will bring new energy, commitment, and vision to the church. Potential prospects include:
 - a. church leaders, both clergy and laity,
 - b. Christians who are the quiet backbone of the church,
 - c. Christians who need a rekindling of grace and an opportunity to renew their commitment to our Lord, and,
 - d. Christians who are hungry for something more and who want to grow spiritually.
3. **Who should you NOT invite to participate in the Walk to Emmaus?**
Emmaus is a wonderful experience for many people, but not for all people. As a sponsor you must be aware of and sensitive to the factors that may have a negative effect on the weekend or be divisive to the church. Examples of questionable sponsorship include:
 - a. non-Christians with no relationship with the church or our Lord,
 - b. persons undergoing an emotional crisis,
 - c. persons whose theology or practice is notably different or incompatible with the theology or practice represented by the Walk To Emmaus,
 - d. persons who continually find fault with the church and may want to create an "Emmaus Church",
 - e. persons who are continually looking for another spiritual high, and
 - f. a person whose spouse is not willing to attend the Walk to Emmaus (A spouse not attending a walk should be included in the decision for their spouse to attend).
4. **How do you sponsor a candidate?** ***Day Four: The Pilgrim's Continued Journey***, has an excellent chapter on "*The Next Generation: Sponsorship*" which elaborates on the following ten steps on how to sponsor a candidate. The steps are:
 - a. pray for the person's openness to God's call to discipleship,
 - b. make an appointment with the person or couple to discuss their participation in Emmaus,
 - c. invite them to attend for the sake of a more vital relationship with Jesus Christ,
 - d. ask them to make a commitment by filling out the registration form,
 - e. continue to pray and request agape letters **but not gifts**,
 - f. support the Walk through your prayer, attendance, and service,
 - g. encourage the pilgrim in his or her 4th Day involvement,
 - h. invite and transport to gatherings
 - i. help the new pilgrim find ways to act out their new commitment and enthusiasm in their home church,
 - j. inform the pilgrim how he or she can serve the Emmaus Community and future walks, and
 - k. help the pilgrim sponsor others.

Sponsorship is an act of love for God, for the candidates, for the Emmaus Community, and for the local church. It is a demonstration of agape love. It is making one's self an instrument of God's prevenient grace.

SPONSOR'S CHECKLIST

- _____ Explain the logistics of the weekend.
- _____ Obtain a completed application from the candidate.
- _____ Complete the sponsor's portion of the application.
- _____ Mail the application, sponsor's portion and deposit to the registrar.
- _____ Bring the pilgrim to Send-off **on time (6:30 p.m. Thursday).**
- _____ Gather and bring agape letters **(not gifts)** to the weekend site.
- _____ Attend Sponsor's Hour. This is after your Pilgrim leaves you.
- _____ Attend to the needs of the pilgrim's family during the weekend.
- _____ Serve behind the scenes at the Walk as a silent servant.
- _____ Attend Candlelight. Announced at Sponsor's Hour.
- _____ Attend Closing & take Pilgrim home with ALL their belongings
- _____ Attend with Pilgrim monthly gathering after the walk.
- _____ Help the pilgrim get into a reunion group.
- _____ Encourage the pilgrim to attend Emmaus Activities & work days
- _____ Encourage the pilgrim to become a sponsor & active member

Emmaus is open to Christians of any denomination. Be intentionally inclusive of the different denominations as you extend your invitations to individuals. The love and call of Christ is for everyone!

This is a sample letter requesting agape letters for pilgrims.

Dear

The Walk to Emmaus is a weekend of spiritual renewal with many beautiful gifts and surprises. **[Pilgrim name]** will be attending The Walk to Emmaus soon, and one of **[his/her]** surprises is the mail that **[he/she]** will receive from **[his/her]** family and friends. This letter is to let you know that we need your help in this surprise.

As sponsors, we are responsible for contacting family and friends and asking them to send a note or letter to **[Pilgrim name]** so that **[he/she]** will receive it during this special weekend. Since it will be a total surprise, we sometimes have to do a little detective work in order to get names and addresses of persons from whom we need help. Perhaps you'd like to pass this letter along to someone that you know **[Pilgrim name]** would like to hear from.

This note or letter is an opportunity for you to express your appreciation of **[Pilgrim name]**. You may also want to recall some humorous event or some happening that has been special to the two of you. This is a letter of love and appreciation and WILL BE READ ONLY BY **[Pilgrim name]**.

We're counting on you to help make **[Pilgrim name]**'s weekend special by doing the following:

1. Write a letter to **[Pilgrim name]** and sign it.
2. Put it in an envelope and seal it.
3. Write **[Pilgrim name]** on the front of the envelope.
4. Put that envelope into a larger envelope and mail it to us prior to _____ so we can get it to **[him/her]** on time.

Our address is: **Sponsor's Name**

Sponsor's Address

This should be a complete surprise to **[Pilgrim name]**, so please don't mention it to **[him/her]** until after _____. We will greatly appreciate your helping us with this surprise. If you have any questions, please feel free to call us at **[Sponsor phone #]**.

Thank you and may God bless you,

[Sign your name]

SUPPLY LIST FOR PILGRIMS

- Comfortable clothes to wear.
- Light jacket, coat or sweater.
- Toilet Articles (soap, toothbrush, toothpaste, etc.)
- Towels & washcloths
- Sheets/blankets or sleeping bag and pillow
- Due to temperature fluctuations in the conference room, you may also want to wear layers to be comfortable.