SPONSOR APPLICATION

Name of Pilgrim:	
	Greater Cincinnati Emmaus Community www.cincinnatiemmaus.org
	www.ciriciiiiadciiiiiad3.0rg

Name of Sponsor				
Home Address – street		Preferred Ph.# w/ area code		
City		State	Zip Code	
Email Address		Cell Ph. # w/ area code		
Name of Church you attend				
Where did you attend Emmaus/Chrysalis/Face to Face/Cursillo?				
When?	Walk/F	light/Encounte	er#?	
Are you in a sharing group?		Do you receive a newsletter?		
Have you served as a Sponsor before?				
Have you completed Sponsorship Training?				
When?				
Where?				

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How long have you known yo	our Pilgrim?	
Why do you think your Pilgrii	m is a good candidate for the Walk to Emmaus?	
	ealth, mobility, and/or ability concerns that ention of the Spiritual or Lay Director?	
Additional comments that ma	ay be helpful:	
As a Sponsor, I am saying "Yes" to Christ – to fulfill my responsibilities in such a way that His grace and love are revealed to this candidate through my Christian action. My signature on this application indicates my commitment to the high calling of servanthood. I have completed sponsorship training, and I will do what is expected of all sponsors during my candidate's weekend.		
Sponsor's Signature:	Date:	

NOTE: To prevent this application from being delayed, please complete all information as requested. Mail the completed Pilgrim and Sponsor Applications with the \$25 deposit to:

Emmaus Walk Registrar c/o St. Paul Community UMC 8221 Miami Ave., Madeira, Ohio 45243