

# SPRINGFIELD AREA WALK TO EMMAUS

(Please PRINT and fill in ALL blanks)

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex: M F  
(as preferred on name tag)

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Married Single Separated Widowed Divorced

Spouse's Name \_\_\_\_\_ Walk spouse attended \_\_\_\_\_

Church now attending \_\_\_\_\_ Pastor \_\_\_\_\_

Church Address \_\_\_\_\_ Phone \_\_\_\_\_

SPONSOR'S NAME \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Walk attended \_\_\_\_\_

Any Dietary/Medical/Disability Concerns:

Name of a close friend \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Briefly state why you want to attend a Walk to Emmaus and what you expect.

Would you be able to attend on short notice? Yes \_\_\_\_\_ No \_\_\_\_\_ Perhaps \_\_\_\_\_

I understand that this application does not reserve a position on a particular Walk, but does place me on a list for future Walks to Emmaus in Springfield.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Enclose a NON-REFUNDABLE deposit of \$25.00, which applies to your \$100.00 donation to offset expenses. Make checks payable to Springfield Area Emmaus. Remit to: Registrar, Springfield Area Emmaus, High Street United Methodist Church, 230 E. High St., Springfield, OH 45505.

REGISTRATION ONLY			
Date Rec'd _____	Card sent to: Sponsor _____	Pilgrim _____	
Deposit Rec'd _____	Cash _____	Check # _____	Rec'd from _____
1 <sup>st</sup> Invite _____	2 <sup>nd</sup> Invite _____	3 <sup>rd</sup> Invite _____	Inactive _____