

MINNESOTA WALK TO EMMAUS

Sponsor Form

Pilgrim's Name: _____

Sponsor's Name: _____

Address: _____ Home Phone: _____

City: _____ State: _____ Zip: _____ Work Phone: _____

Email: _____

Name of church you attend: _____

Where did you make your pilgrim Walk? _____ Walk Number _____

Name of Reunion Group: _____

Why do you feel this person is a good candidate for the Walk? _____

Does the pilgrim have physical/mental health issues for a Walk to Emmaus weekend? No Yes

Please explain (if yes): _____

If the pilgrim is married, have you discussed the Walk to Emmaus with the spouse? No Yes

Will the spouse be attending? _____ If not, why? _____

Will you be bringing the pilgrim to/from the Walk? No Yes / If no, what arrangements have you made for their transportation? _____

Will you be attending: Sponsor's Hour (Thursday) Candlelight (Saturday) Closing (Sunday)

Are you aware of the importance of minimal contact during the weekend, especially if the pilgrim is your spouse?

Can you care for the needs of the pilgrim's family during the weekend? _____

Have you explained the Fourth Day Meeting? _____ Will you bring the pilgrim? _____

Are you willing and able to get the pilgrim into a Reunion Group? _____

- ◆ Are you praying and sacrificing for your pilgrim now?

Sponsoring a pilgrim is both a joy and a responsibility. There are things you must do for your pilgrim before, during, and after the weekend. Details of your responsibilities will be sent to you in the near future. Remember that the Walk to Emmaus is not structured to solve deep-seeded personal problems. It is designed to provide a personal encounter with Jesus Christ to those who attend.

Your Signature: _____ Date _____

Return this completed form, the pilgrim's Request for Reservation form, and a \$15 non-refundable application fee to:

Beth Tomlinson, Registrar
MN Walk to Emmaus
2161 - 105th Lane NW
Coon Rapids, MN 55433
(763) 755-8366
bethtom_54@yahoo.com

- ◆ Please make your check payable to Minnesota Walk to Emmaus.