



Servant Heart Emmaus Community

P.O. Box 807, Mobile, AL 36601

Becky Comer, Registrar (contactshew@gmail.com)

For Registrar Use Only

Amount Paid:

Check #

TO BE COMPLETED BY APPLICANT

<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Rev.	First Name:		Last Name:	
Name on Nametag:		<input type="checkbox"/> Male <input type="checkbox"/> Female	Birth Date:	
Address:				
City:		State:	Zip code:	
Email:		Employer:		
Home Phone:		Work Phone:	Cell Phone:	
Church:		Pastor:		
Emergency Contact:			Relationship:	
Emergency Day Phone:		Emergency Night Phone:		
Please describe any special diet:				
Please describe any health or physical limitations:				<input type="checkbox"/> Requires downstairs at the hotel
Briefly state why you decided to apply for a Walk to Emmaus:				
<p style="text-align: center;">PLEASE READ CAREFULLY</p> <p>Please enclose a registration deposit of \$50.00. This will be applied toward your \$165.00 walk fee (the remaining amount will be paid at registration). Please make checks payable to "Servant Heart Emmaus Community." DEPOSIT IS NOT REFUNDABLE. When you are invited to attend an upcoming Walk to Emmaus, you should plan to remain the entire weekend. If you feel that you cannot make the commitment to remain the entire weekend, you should reschedule for another Walk. You MUST have a sponsor before this application can be accepted.</p>				
Have these been explained to you? <input type="checkbox"/> Walk Weekend <input type="checkbox"/> Follow-up <input type="checkbox"/> Reunion Groups				
Signature:			Date:	

TO BE COMPLETED BY SPONSOR

Name:		Phone Number:	
Email:		<input type="checkbox"/> I need to update my information in the database	
<input type="checkbox"/> I am familiar with my sponsor responsibilities		<input type="checkbox"/> I will fulfill my responsibilities as a sponsor	
Please state your reasons for nominating the applicant and any other comments on the back of this application.			
Signature:		Date:	