

# + **Texoma Emmaus Community**

## 2017 Request for Reservation - The Upper Room Walk To Emmaus

- Please print the answers to **all** questions. This information is needed for proper placement.
- All signatures must be in place before your request can be considered.
- Attach a pre-registration deposit of \$75.00 to this form (No faxes will be accepted). This deposit is ***non-refundable***.
- Make checks payable to the Texoma Emmaus Community. **Checks may be deposited upon receipt.**
- The total fee for the weekend is \$225.00. The balance due may be paid upon arrival at the site Thursday evening.
- Return completed reservation request with your deposit to your sponsor. Your sponsor will submit form to Registrar.

Note: When an applicant is placed on a walk, the sponsor and the applicant both receive information about the walk. Sponsors will be notified when application is received. If you have not received information, sponsors may call registration to confirm receipt of application and the applicant's status.

**PLEASE PRINT CLEARLY:**

***PLEASE USE COMPLETE NAME OF CHURCH***

X X  
**NAME** **Male/Female**

X  
**MAILING ADDRESS**

X X X  
**CITY** **STATE** **ZIP**

X X  
**PRIMARY PHONE** **DATE OF BIRTH**

X  
**OCCUPATION**

X  
**E-MAIL ADDRESS**

Print your name exactly the way it should be on your nametag:

**PLEASE CIRCLE: SINGLE MARRIED WIDOWED**

X  
**IF YOU HAVE ANY SPECIAL NEEDS, HOW CAN WE HELP?**

X  
**SPECIAL MEDICATIONS (Directions) OR ALLERGIES?**

X  
**DO YOU NEED A SPECIAL DIET OR HAVE ALLEGIES TO FOODS?**

X  
**HEALTH OR PHYSICAL HANDICAPS, HOW CAN WE HELP?**

X

X  
**ADDITIONAL NOTES OR COMMENTS: Smoking or Non-Smoking?**

X  
**EMERGENCY CONTACT: NAME AND PHONE NUMBER & RELATIONSHIP.**

**CHURCH YOU ATTEND**

X  
**CHURCH ADDRESS**

X X X  
**CITY** **STATE** **ZIP**

X X  
**PASTOR'S NAME (Please Print)** **CHURCH PHONE**

### 2017 TEXOMA EMMAUS WALKS

WOMEN'S Walk # 97 March 9-12  
 MEN'S Walk # 98 March 23-26

X  
**CAN YOU ATTEND ON SHORT NOTICE (3-4 DAYS)?**

X  
**HAS THE WALK BEEN EXPLAINED TO YOU?**

X  
**STATE BRIEFLY WHAT YOU EXPECT FROM THE WEEKEND**

X X  
**CANDIDATE'S SIGNATURE** **DATE**

X X  
**CANDIDATE'S PASTOR'S SIGNATURE** **DATE**

Have you (pastor) attended an Emmaus, Cursillo or Tres Dias weekend? If yes, Date & weekend attended. \_\_\_\_\_

Database \_\_\_\_\_ Communication \_\_\_\_\_ Sponsor Email \_\_\_\_\_ Pilgrim Letter \_\_\_\_\_  
 For registrar's use only: Date Rec'd \_\_\_\_\_ Amt Paid \_\_\_\_\_ Cash/Check # \_\_\_\_\_

