

Florida Aldersgate Walk to Emmaus

Sponsor's Sheet

To be completed by sponsor (one pilgrim per form, please). PLEASE PRINT.

Pilgrim's Name: _____ Gender: _____ Age: _____

Spouse's Sponsor: _____

How long have you know the pilgrim?: _____

Why do you feel this person would be a good pilgrim?: _____

- Have you fully explained the Emmaus program and weekend to your pilgrim?
- Will you assist your pilgrim getting into or establishing a Reunion Group?
- Will you pray for your pilgrim?
- Will you bring your pilgrim to the weekend sendoff?
- Will you attend Sponsor's Hour?
- Will you attend Candlelight?
- Will you attend Closing?
- Will you care for the needs of your pilgrim during the weekend?
- Does your pilgrim have the necessary mental and physical health to attend the weekend?
- Will your pilgrim have a physical problem if assigned an upper bunk?
- Is your pilgrim under any emotional strain that might indicate that your Pilgrim be postponed?

Pilgrim's choice of weekend based on his/her availability is:

1st Choice: _____ 2nd Choice: _____

Sponsor Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____ Mobile Phone: _____

Email Address: _____

Church Name: _____

Denomination: _____ Attend Regularly?: _____

Where did you make your Emmaus/Cursillo walk?: _____

Date: _____ Walk #: _____ Are you in a reunion group?: _____

Note: Please remember that the Walk to Emmaus weekend is an intense program of Christian study and spiritual growth. It is not a retreat, a cure-all for persons who may be experiencing temporary problems, nor is it meant to be a "conversion experience". Pilgrim should be active in their church, desire an opportunity to grow in Christ and enhance their role in church leadership.

Sponsor's Signature: _____ Date: _____

Please mail completed Sponsor's Sheet, Request for Reservation and \$95.00 deposit to:

Aldersgate Registrar
2555 Palm Avenue
Oviedo, FL 32765