

BLUE LAKE EMMAUS WALK

PO Box 1334 Mary Esther, FL 32569

registrar@bluelake.us

<i>For Office Use Only</i>				
Check By:	Dep. Amt:	Ck Amt:	Ck No.:	Date: MM / DD / YYYY
I. This section to be filled out by the candidate, only. Use reverse side for any supplemental information.				
Full Name: PLEASE PRINT LEGIBLY			Name for name tag?	
Mailing Address:			Zip:	
Preferred Phone: () —			Email:	
Birthday: MM / DD / YYYY	Gender: M F	Clergy? Y N	Has Spouse Attended? Y N	
Occupation/Skill: DO NOT LEAVE BLANK			Smoker? Y N	
Marital Status: Married (spouse name: _____) Single Widowed Separated Divorced				
Describe health or physical assistance required:	IF NONE, ENTER "NONE"			
List any required medications & medical devices	IF NONE, ENTER "NONE"			
Describe any dietary restrictions/needs/allergies	IF NONE, ENTER "NONE"			
Why did you decide to apply for a Walk to Emmaus?	DO NOT LEAVE BLANK			
Church (include zip code): DO NOT LEAVE BLANK (e.g. "Crestview 1 st UMC," not just "1 st UMC")			Pastor: DO NOT LEAVE BLANK	
<p>READ CAREFULLY: Please complete the Candidate section, above, sign & date below, then give this to your qualified Sponsor. A \$50 <u>non-refundable</u> deposit is required to process the application. Make the check or money order payable to the <u>Blue Lake Emmaus Community</u>. The deposit goes towards the \$130 cost of the weekend. The \$80 balance is paid the day the walk begins. We will notify you and your sponsor by mail when a position becomes available. Advise your sponsor if you need a scholarship. You should plan to remain the entire weekend.</p>				
Signature:			Date: MM / DD / YYYY	
II. This section to be filled out by a qualified sponsor, only. Use reverse side for any supplemental information.				
Make sure to update your IMS contact information (see www.bluelake.us) to match what you enter, below.				
Name:				
Address:			Zip:	
Preferred Phone: () —			Email:	
Your walk	Year?	Location?	No.?	
Sponsor Comments:				
Signature:			Date: MM / DD / YYYY	