

Shenandoah Valley Emmaus Community
Pilgrim Application

TO BE COMPLETED BY APPLICANT



WALK TO
EMMAUS
THE UPPER ROOM®

The Preferred Method is online registration: Please, complete online if possible at: ShenandoahValleyEmmaus.org and click on Pilgrim Application & pay fee online.

Revised: 10/19/23

Name: _____ Today's Date: _____

Preferred Name for Name Badge: _____

Mailing Address: _____

City/State/Zip: _____ Preferred Phone: _____

Is this a Mobile phone? [] yes [] no

Email Address: _____

>>> SVEC will contact you primarily by email. Check your email regularly. <<<

Age: _____ Gender: M [] F []

Application Fee (amount posted online) Submitted. [] yes
>> FEE MUST BE PAID BY APPLICANT BEFORE THE APPLICATION IS PROCESSED. <<

Occupation: _____

Emergency Contact: _____ Emergency Contact Phone #: _____

Do you require any physical assistance to attend? If so, please explain: _____

List any important food allergies/restrictions that may require special attention by Food Service: _____

List any other health problems that may affect your attendance: _____

List any medications and times to be taken other than at meal time, bedtime or waking up : _____

What faith community are you active in? Church Name: _____

Denomination: _____ Town where your church is located: _____

Your Pastor's Name: _____ Your Pastor's Email: _____

Your Sponsor: _____ Your Sponsor's Email: _____

Briefly state why you wish to attend an Emmaus Weekend, what you hope to glean from it, or anything else you would like to share: _____

Return the completed application and the APPLICATION FEE to your sponsor. [Keep a copy for your records.]

>> If you have not received an acknowledgement within 3 weeks of submission (or 10 days before the expected Walk date), contact your sponsor.