

Emmaus

**TEAM MEMBER APPLICATION FOR SOUTHERN CALIFORNIA WALK TO EMMAUS
TO BE COMPLETED BY TEAM MEMBER APPLICANT: (Please type or print both sides)**

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME PHONE: _____ WORK PHONE: _____

E-MAIL ADDRESS: _____

YOUR AGE: _____ YOUR OCCUPATION: _____

Your marital status: Never Married Married Divorced Widowed Separated

Church you current attend: _____

Your church's denomination _____ OR Non-denominational

If our community has permission to contact your pastor by letter following this Walk, please check here:

Month/year (mm/yyyy) and/or Walk number you attended Walk to Emmaus/Cursillo as a pilgrim: _____ / E-_____

Emmaus/Cursillo community in which you attended the Walk as a pilgrim: _____

Check what you are applying for: Men's Team Women's Team Spiritual Director

If you are First Aid certified, list First Aid Certificate expiration date (month and year) _____

If you are CPR certified, list CPR Certificate expiration date (month and year) _____

List any special diet requirements you have: _____

List any musical instruments you play: _____

List any other talents or interests you would let God use during a Walk to Emmaus weekend: _____

List other information or comments, which you would like to have considered in placing you on a team for a Walk to Emmaus Weekend: _____

Bilingual: Yes No Language: _____ Do you smoke? Yes No

Please indicate Walk to Emmaus work experience in this community by entering numbers to show how many times you have worked in each of the following positions:

POSTITION	Number of Times Worked	POSTITION	Number of Times Worked
Weekend Lay Director		Spiritual Director	
Assistant Lay Director		Head Musician	
Head Cook		Musician	
Asst Head Cook (Dining Rm)		Head Table Leader	
Asst Head Cook (Facilities)		Table Leader	
Asst Head Cook (Kitchen)		Head Agape	
Cook		Agape	
Head Spiritual Director		Board Representative	

How many times have you worked as an Angel? ___

Are you available to work as an Angel on either of the two upcoming walk(s)? Yes No

Please continue on the reverse side of the application

Please indicate Walk to Emmaus/Cursillo speaker experience by entering numbers to show how many times you have presented each of the following talks:

TALK	Number of Times Presented	TALK	Number of Times Presented
Priority		Obstacles to Grace	
Prevenient Grace		Discipleship	
Priesthood of all Believers		Changing Our World	
Justifying Grace		Sanctifying Grace	
Life of Piety		Body of Christ	
Grow through Study		Green	
Means of Grace		Perseverance	
Christian Action		Fourth Day	

You must be willing to commit to more than 20 hours of team preparation time in meeting held during the six to eight weeks prior to the weekend. You are expected to attend all team meetings scheduled during that six to eight-week period.

List any specific weekends during that time period when you cannot attend a meeting: _____

Please note that a team member application is considered for only the one Walk being applied for. Whether or not you work at the Walk you apply for, a new application must be completed to work on another Walk. This application is not carried over to another Walk, whether the reason for not working is yours, or you are not chosen to work.

If this will be the first time you have ever worked in this community, check here: (A previously non-selected worker can be guaranteed a team member position only if this application is submitted no later than two weeks after the Reunion of the previous Walks.)

If you did not work at the last Walk you applied for because you were not chosen, check here: (A previously non-selected worker can be guaranteed a team member position only if this application is submitted no later than two weeks after the Reunion of the previous Walks.)

Emergency contact name			
Emergency contact phone number		Emergency contact e-mail	

I have prayed about being a team member and understand the responsibilities involved in this position. I pledge, with Christ's help, to do my best to meet them.

Signature of team member applicant: _____ Date: _____

Please send this completed application to: Southern California Walk to Emmaus
 Tim Black, Registrar
 1402 Crest Dr.
 Altadena, CA 91001

Phone: **1.818.522.1529**
 Email: **black.timp@gmail.com**