

Central Mississippi Walk to Emmaus Team Application

This form can also be completed online at centralmsemmaus.com



Name: _____
Address: _____
Home Phone: _____ Cell Phone _____ Work Phone: _____
Email: _____ Date of Birth: _____ Gender: Male: ___ Female: ___
Occupation: _____ Church You Currently Attend: _____
Original Walk/Flight: _____ Original Walk/Flight # _____ Original Walk/Flight Year: _____
Reunion Group: _____ Married: Yes: ___ No: ___
If married, Spouse's Name: _____ Which Walk to Work: Men's ___ Women's: ___
Are you on a special diet Yes ___ No ___ If yes, specify type _____
Time of year: April: ___ July: ___ October: ___
Abilities & Interest:
Can Sing: ___ Can Lead Singing: ___ Play Guitar: ___ Play Piano: ___ Can type & can bring computer and printer to
Walk: ___ Other: ___ Please describe Other: _____
If you have served in a servant position during any previous Walk in ANY community, please indicate the
number of times in each capacity:
LD: ___ Walk # as LD: ___ ALD: ___ SD: ___ ASD: ___ TL: ___ ATL: ___ Music Leader: ___ Board
Advisor: ___ Music: ___ Comm. Coord.: ___ Prayer Rook: ___ Worship: ___ Agape: ___ Food: ___
Conf. Room Cleanup: ___ Reg. & Booklet: ___ Lit. & Supplies: ___ Floater: ___
Please indicate which talks you have already given by entering the number of times you have given that talk.
Priority: ___ Prevenient Grace: ___ Priesthood of all Believers: ___ Justifying Grace: ___ Life in Piety: ___
Growth thru Study: ___ Means of Grace: ___ Christian Action: ___ Obstacles to Grace: ___ Discipleship: ___
Changing our World: ___ Sanctifying Grace: ___ Body of Christ: ___ Perseverance: ___ Fourth Day: ___
Are you a member of Clergy: Yes: ___ No: ___
If you cannot serve on a team, would you like to:
Set up for Saturday night ___ Work on the Prayer Chain ___ Other: _____
Are you physically limited in any way that would not be considered on team assignments?
No: ___ Yes: ___ If Yes, please explain: _____
Are you CPR/AED Certified: CPR ___ AED ___ (Please include a copy of your certification card)
I have prayed about being a team member and understand the responsibilities involved in this position. I pledge to do
my best to meet these responsibilities: _____

Complete this form and return it as soon as to:

Monica Parker
17 Colton Drive
Merigold, MS 38759
centralmsemmaus@gmail.com

Everyone who wishes to serve on a team MUST have an application on file. The names of the applicants are furnished to the Lay Director six months prior to the weekend of the Walk. As a team member, you will be asked to contribute \$225.00 towards the expense of food and lodging. Remember; DO NOT be discouraged if you are not asked to serve on an Emmaus Walk right away. You will be called when the Lord leads!