

SPONSOR'S COVENANT
Emmaus of the Midlands

1. Candidate's Name _____

Sponsor Information:

2. Name _____ 3. Community/Walk Number _____

4. Street Address _____

5. City/State/Zip _____

6. Phone (Mobile) _____ 7. Phone (Home/Other) _____

8. E-mail _____ 9. Church _____

10. How long have you known the candidate? _____ 11. Does the candidate have the physical health to fully participate? _____ If no, please explain. _____

12. Why do you feel this person is a good candidate for *Emmaus*? _____

13. Are you prepared to support your candidate by participating in all weekend activities? _____

If no, please explain _____

14. Have you ever sponsored a Pilgrim before? _____ If no, have you attended a sponsorship Seminar? _____

15. Do you understand that no individual agape will be delivered to the candidate? _____

16. If married, has the candidate's spouse attended a *Walk to Emmaus*? _____ Walk No. _____

17. If no, what is the intent of the spouse? _____

I understand the importance of faithfulness to my candidate during the weekend. I will continue my support of the candidate after the weekend with follow-up.

18. Today's date ____/____/____ Signature _____

Sponsor: Please send this application with deposit to:

**Kim Corrigan
ATTN: Emmaus
1441 Old Chapin Rd
Bldg 7, Unit 711
Lexington, SC 29072
(513) 293-9907**

For Completion by Emmaus Registrar

Date Received ____/____/____ Check # _____ Amount _____ Purpose _____