

KOINONIA EMMAUS COMMUNITY
Of NORTHEAST MISSISSIPPI
SPONSOR FORM

To be completed by **SPONSOR:**

Please Print

Pilgrim's Name _____ Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____

Sponsor's Name _____ Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____

Complete name of church now attending _____

Do you attend regularly? _____ Where and when did you make your Cursillo/Walk to Emmaus?

_____ Walk # _____

Are you now in a Reunion group/Emmaus group? _____

Do you receive the Koinonia Emmaus Newsletter? _____

How many Pilgrims have you sponsored in the past year? _____

Why do you feel that this person would be a good Pilgrim? _____

Are you praying and sacrificing for your Pilgrim? _____

Does the Pilgrim have the physical and mental health needed for a Walk to Emmaus Weekend?

_____ Is the Pilgrim under any temporary emotional strain that might indicate his/her weekend

should be postponed? _____

Are you able and willing to assist the Pilgrim to get into an Emmaus group? _____

If the Pilgrim is married, have you discussed the Walk to Emmaus with the spouse? _____ Will

you bring your Pilgrim to the Emmaus site? ___ Attend the Sponsor's Hour? ___ Attend

Candlelight? ___ Attend the Closing? _____ Can you care for the needs of the Pilgrim's family

during the weekend? _____ Have you explained the post-weekend meeting? ___ Are you

aware of the importance of minimal contact with your Pilgrim during the Weekend, especially if the

Pilgrim is your spouse? _____

Sponsor's Signature _____

Mail Pilgrim application, Sponsor form and \$25.00 deposit to: (Incomplete applications will not be processed)

Vicki Trexler, Emmaus Registrar
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