Chrysalis - Request for Reservation Llano Estacado Emmaus/Chrysalis Community

Dear Candidate:

All of the information requested is necessary for your proper placement in the Chrysalis Flight. Incomplete applications are not considered and will be returned. The fee is \$125 for all flights. The fees must accompany this application. Once you are accepted, only \$115 will be refunded upon cancellation. Scholarships are available and should be arranged through your sponsor. Upon acceptance, you will be notified by mail and other information necessary will be provided. Please note that the medical release from is a part of this application and must be signed and notarized.

Please check applicable date: High School Flaguery guy's Journey #	ights are at the Ark- Ar Girls Journ	nherst –College are at M ev #	1ercy Center
		.,	
Applicant Information: (must have completed fro Name			
Preferred Name-Tag Name (if different)			
NamePreferred Name-Tag Name (if different) Grade completed at time of Chrysalis Present Address	School Attending _		
Present AddressCity	State	Zin Code	
Permanent Address		Zip couc	
City	State	Zin Code	
CityName/Denomination of Church Now Attending	σ	Zip code	
Are you actively involved in a youth group at y	your church? Yes	No	
Your SignaturePastor or Youth Director's Name	1101116 1 110		
Pastor or Youth Director's Signature			
Sponsor's Information: (Must have attended "V Sponsor' Name	Walk" or "Chrysalis".)		
Address			
Address City Home Phone Community Affiliation	State	Zip Code	
Home Phone	Work Phone		
Community Affiliation			
It is mandatory that this entire page be completed for those			nd older complete 1 - 5 in the middle of the page
I, Chrysalis weekend. During this time I may be reached at the	, who has my permise	e parent/guardian of sion to attend the	
Address:		ne numbers.	
Home Phone:			
Work Phone: Please provide the following information about the candidate of the candidate o	ate:		
List any Allergies			
2. Special Medication			
(If so, please send medicine in prescription container, lal 3. Doctor's name and phone number	beled with instructions and co	ontent.)	
Special health problems or physical handicap that may a	ffect candidate's participation	n:	
AUTHORIZATION: I understand that my son/daughter will be in the care of the emergency and in case I cannot be readily contacted, the C medial treatment available for my child. I also understand t medical treatment.	hrysalis Staff has my permiss	sion to secure any	
Signature of Parent/Guardian Date Notary Declaration: Subscribed and sworn before me, a Notary Public in County, Texas, on this day of Signature of Notary			
My Commission Expires			

Llano Estacado Chrysalis Community

Sponsor's Application

SPONSOR: Please fill out this form completely and send with the candidate's application and application fee to the address on the bottom of the application. It is important that YOU as sponsor take care of this process.

Sponsor's Name	Where did you go on your Walk to Emmaus/Chrysalis /Kairos / Cursillo? When? Where? Walk/Flight Number			
Mailing Address: E-Mail City: State: Zip: Home Phone: ()	Have you attended a community meeting? Church Denomination:			
Work Phone: ()	How long have you know the candidate?			
Have you attended Sponsorship Training?				
	e a fully participating sponsor. Please answer each question. If you cannot answer et explaining why you cannot fulfill the sponsor's duties. These explanations will be			
Name of Candidate:	Are you willing and able to assist the candidate in joining a Reunion Group?YesNo			
Name desired on name tag:				
Explain any special physical or mental health needs Of the candidate:	Have you explained the post Emmaus meetings? YesNo			
	As a sponsor, you are responsible to participate in these events. Please indicate the events you will attend:			
Have you sponsored a candidate before?				
Have you made sure that your candidate has a nice Outfit for Dinner?	Send-offSponsor's Hour ClosingFirst Community ** (If another community, find where it meets)			
Are you praying for your candidate?	** (If another community, find where it meets)			
Will you bring food and pillow Agape?No	Have you signed up for the Prayer Vigil? Yes No			
Have you explained to the candidate, except in emergency they should expect no contact during the weekend? Yes No	Have you explained what a Chrysalis is to the parents, roommate(s) or spouse? Yes No			
Sponsor's Signature:				
Mail this completed form and fee to:				
Girls: Carolyn Botkin PO Box 1415 Tahoka, TX 79373 (806) 561-5462	Boys: Penny Wilson 2820 74 th Place Lubbock, TX 79423 (806) 745-6711			
tgbotkin4@aol.com	twobytwo@nts-online.net			
FOR REGISTRAR'S USE ONLY Date received: Amt. PD Ck# Cash Confirm letter: Sponsor Caterpillar				
Waiting List Letter: SponsorCaterpillar	_			