

SUPERIORLAND EMMAUS COMMUNITY

Fall 2019 WALKS AT

Camp Michigamme

SPONSOR INFORMATION

(To be filled out by sponsor and returned with the candidate's application and deposit)

Candidate Name: _____

Sponsor Name: _____

Sponsor's Mailing Address : _____
(City) (State) (Zip)

Sponsor's phone (home): _____ (work): _____ (cell): _____ E-Mail: _____

Sponsor's Place of Worship : _____

Where did you make your walk to Emmaus? _____

Are you praying for your candidate? _____

Why do you feel this person would be a good candidate?

Does your candidate have any special needs? _____ Yes _____ No
If yes, please contact the Lay Director. Thank You!

If your Candidate is married, have you discussed the Walk to Emmaus with his/her spouse? _____ Have you encouraged the spouse to attend the corresponding weekend? _____ Will you assist your Candidate in joining an Emmaus Group? _____ Will you bring your Candidate to the weekend site? _____ Can you care for the needs of the Candidate's family over the weekend? _____ Are you aware of the importance of minimal contact with your Candidate during the weekend, especially if the Candidate is your spouse? _____

Sponsor: Please make sure that you have fully completed this form and all questions are answered before mailing it, along with the completed candidate application and deposit, to the registrar.

As a sponsor, I understand ALL of MY responsibilities and will prayerfully work to comply with them prior to, during and following the Walk.

Signed: _____ Date: _____

Sponsor

DEADLINE FOR APPLICATION IS TWO (2) WEEKS PRIOR TO THE WALK

**Registrar: Marcia Waters
148 Heritage Dr
Negaunee, MI 49866**

**(906) 475-7744
mmwaters@negauneehousing.org**

PRAY FOR YOUR CANDIDATE!