



FACE to FACE ENCOUNTER

A Ministry of the South Georgia Walk to Emmaus

PILGRIM APPLICATION

Provide a separate application for each attendee

(If Spouse is attending the Encounter, Spouse will complete separate application)

NOTE: This is only an application. Notification of placement will be made by email or mail. All information requested is necessary for your proper placement on a Face To Face Encounter. Placement will be made based on date received at the SGWTE office and availability of space. It is recommended you have a sponsor on your Encounter by someone who has completed a Walk to Emmaus, Cursillo, Chrystalis, Tres Dias, or similar encounter.

Name: _____

Preferred Name on name tag: _____

Address: City: State: Zip: _____

Home Phone: () _____ Cell Phone: () _____

E-mail: _____

Marital Status: Married Single Widowed Date of Birth _____

Is your spouse attending this Encounter with you? Spouse's Name: _____

Medical Information – Please complete this section to help the team be prepared for your needs.

List any physical limitations or restrictions we would need to know about. _____

Do you have any special dietary needs? _____

Are you being sponsored on this Encounter? Yes No (Sponsorship is highly recommended but not required.)

Applicant's Church and Pastor Information

The focus of Face To Face is God, as known in Jesus Christ, and how that finds expression in the local church. The objective of Face To Face is to inspire, challenge, and equip local church members for Christian action in their homes, churches, and places of work.

Church Name: _____

Phone: _____

Pastor Name: _____

Email: _____

Your Signature: _____ Date: _____

Encounter Fee \$60.00 (Make checks payable to SGWTE.)

Partial scholarships up to \$40 are available if needed Scholarship requested? _____

There are several ways you can submit this application once completed:

1. If you have a sponsor, give it to them and they can send it to the registrar.
2. If you do not have a sponsor then Mail to:

SGWTE P.O. Box 2032 Valdosta, Ga 31604

3. Call your sponsor with any questions, otherwise contact the Registrar with questions at admin@sgwte.org

Office Use Only
Date Received: _____
Encounter # _____
Amount Paid: _____



Scan here to fill out application online



Scan the Q-R Code to pay online