

RICHMOND EMMAUS — FACE to FACE Team Application

Please PRINT LEGIBLY in Black or Blue Ink

Name: _____ Preferred name: _____

Address: _____
Street City State/Zip

Home Phone: _____ Work Phone: _____

Alternate Phone: _____ E-mail: _____

Home church: _____ Pastor: _____

Church address: _____
Street City State/Zip

Date, Community and Walk # of your Emmaus Walk _____

When did you attend: Fourth Day Training: _____

Sponsorship Training: _____

Lay Director Training: _____

Are you currently in a Reunion Group or other Accountability Group? Yes No

Fourth Day Activities: _____

Previous team(s) on which you have served — list by event number, or write “none” if this is your first teaming application: _____

Team positions you have held (check all that apply):

- OST TL ATL FS CS TRS MD AMD
- IAHS OAHS SSS WLD AWLD WLD BR

Talks you have given (check all that apply):

- Priorities Priesthood of All Believers Life of Piety
- Grow Through Study Christian Action Discipleship
- Changing Our World Body of Christ Perseverance Fourth Day

If you'd like to play a musical instrument, which one(s)? _____

TEAM MEMBERS ARE ASKED TO CONTRIBUTE to the cost of the event, currently \$100.00. If you cannot do so, financial assistance is available and you are welcome to apply, but you must let your Lay Director know at the start of teaming.

Signature of Applicant _____

Date _____

Mail your application to: Richmond Emmaus, Attn: Team Selection Committee
P.O. Box 1717, Midlothian, VA 23113

For completion by TSC:
Date Application Received: _____

Event invited to: _____