



APPLICATION for EMMAUS TEAM SERVICE

Mail to: **TEAM APPLICATIONS, HBAEC, P. O. Box 890134, Houston, Texas 77289-0134**

Name _____ Male Female Lay Clergy
Last First Initial

Address _____ City _____ Zip _____

Telephone # (____) _____ Work (____) _____ Email _____

Date of Birth _____ Occupation _____ Employed by _____

Complete name of church you attend _____

Pastor's Name _____ Phone # (____) _____

Indicate church activities: _____

Do you meet regularly in a Group Reunion or Accountability Group? YES () NO ()

Location _____ Day _____ Time _____

I attended: Emmaus () Cursillo () Via de Christo () Chrysalis () Kairos () Date _____

Place: _____ Walk # _____ Table Name _____

I have served as a member of the following team (s): use backside if necessary:

* Team _____	Date _____	Place _____	Job _____	Talk _____
* Team _____	Date _____	Place _____	Job _____	Talk _____
* Team _____	Date _____	Place _____	Job _____	Talk _____
* Team _____	Date _____	Place _____	Job _____	Talk _____
* Team _____	Date _____	Place _____	Job _____	Talk _____

Do you play a musical instrument? YES NO If so what kind _____

Can you sing? YES NO Or lead music? YES NO _____

Do you require special dietary needs or are there any other health problems that may require special needs?

YES NO If yes, please describe _____

If accepted to serve on an Emmaus Team, I commit to attending **ALL** the Team Formation Meetings, to be active in a reunion group, to be present for the entire three-day Walk to Emmaus weekend including the Closing, **and to attend the team follow-up meeting.** I also agree, in a spirit of love and obedience, to follow the guidelines for team service as outlined in the Team Manual, and as directed by The Houston BAY AREA Emmaus Community Board through its representative and the Lay Director of the weekend. I understand that I will be responsible to pay the **\$165.00** fee for the weekend.

***I agree in a spirit of love and obedience to accept any job asked of me _____
and to be willing to pray about giving a talk if asked.***

Your Signature _____ date _____

THIS APPLICATION HAS MY APPROVAL: _____

Pastor's Signature