

EMMAUS TEAM VOLUNTEER SHEET

Please complete the following, turn it in or mail it to the Elizabethtown Area Emmaus Community, P.O. Box 2070, Elizabethtown, KY 42702 if you want to serve on a walk. **PLEASE PRINT LEGIBLY.**

NAME _____ Walk# _____ AGE _____ DATE _____, 200__

ADDRESS _____
STREET CITY STATE ZIP

PHONE NUMBER (WITH AREA CODE) (HOME) _____ (WORK) _____

CHURCH _____ (CITY) _____ (MINISTER) _____

REUNION GROUP INFORMATION:

NAME _____ DAY/TIME _____ LOCATION _____

Where would you be willing to serve on a team? Check ALL that apply.

EMMAUS _____ CHRYSALIS _____ REC (prison) _____
 KITCHEN _____ DINING ROOM COOR. _____ AGAPE _____ SPEAKER _____ TABLE LEADER _____
 ASST. LAY DIRECTOR _____ LAY DIRECTOR _____ CLERGY _____
 MUSIC _____ IN MUSIC I CAN _____

Please check ALL the times you are available to serve:

SPRING _____ FALL _____

EMMAUS TEAM EXPERIENCE: Please indicate the Emmaus Walk # beside the areas in which you have served. If you have Chrysalis or REC team experience, please list those on the back of this form.

Priority _____
 Prevenient Grace _____
 Priesthood _____
 Justifying Grace _____
 Life in Piety _____
 Growth Through Study _____
 Means of Grace _____
 Christian Action _____
 Obstacles to Grace _____
 Discipleship _____
 Changing Our World _____
 Sanctifying Grace _____
 Body of Christ _____
 Perseverance _____
 Fourth Day _____

Lay Director _____
 Asst. Lay Director _____
 Logistics Coord. _____
 Agape Coord. _____
 Kitchen Coord. _____
 Music _____
 Table Leader _____
 Asst. Table Leader _____
 Agape _____
 Kitchen _____
 Dining Room Coord. _____
 Flogster 1 _____
 Spiritual Director _____
 Asst. Spiritual Director _____
 Clean Up _____