

**South Eastern Caribbean – Trinidad**  
**May 23-26, 2013**

**Candidate Form**

Please print the answers to all the following questions. This information is necessary for proper placement in the Walk to Emmaus. Use one form per candidate. Cost of attendance is TT\$475.00

**Personal Information – PLEASE PRINT**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Address: \_\_\_\_\_

Country \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ E-mail: \_\_\_\_\_

Married: \_\_\_\_\_ Single: \_\_\_\_\_ Divorced: \_\_\_\_\_ Widowed: \_\_\_\_\_ No of Children: \_\_\_\_\_

Occupation: \_\_\_\_\_

What Church do you attend? \_\_\_\_\_

In what religious organizations are you active: \_\_\_\_\_

Sponsor's Name: \_\_\_\_\_ Sponsor's Phone Number: \_\_\_\_\_

**Walk Information: Please tick one or fill in completely:**

Do you have any special dietary needs?	Yes: _____	No: _____
Are you on any special medications?	Yes: _____	No: _____
Please indicate any special accommodations we need to make for any health or physical handicap.		

**State Briefly why you wish to attend the Walk to Emmaus?** \_\_\_\_\_

**Please list person to contact in case of Emergency:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Candidate's Signature: \_\_\_\_\_

Pastor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_