

West Michigan Emmaus Community EMMAUS TEAM REGISTRATION

Walk # _____

Date _____

Inside Team _____

Outside Team _____

PLEASE PRINT AND FILL IN ALL BLANKS

| | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------|------------------|
| Name: | | Nickname: | Sex: M F |
| Address: | | Home Phone: () | |
| City, State, Zip: | | Work Phone: () | |
| Employer: | | Fax Number: () | |
| Occupation: | | Email: | |
| Age: | Marital Status: | Spouse's Name: | No. of Children: |
| Special Medication? | | Special Diet? | |
| <p>Made your weekend? _____ Where _____</p> <p>Areas Worked: (describe)</p> <p>Inside Team: _____</p> <p>_____</p> <p>_____</p> <p>Outside Team: _____</p> <p>_____</p> <p>_____</p> <p>Talks Given: _____</p> | | | |
| Church: _____ | | Denomination: _____ | |
| Church Address: _____ | | | |
| Pastor's Name: _____ | | Church Phone: () _____ | |
| Emergency Contact: _____ | | Emerg. Phone: () _____ | |

Please return with your suggested team fee of \$50.00 to:

WEST MICHIGAN EMMAUS COMMUNITY
P. O. BOX 595 • HART, MI 49420-0595