

Applicant Information

Date of application: _____ Scheduled Flight Requested: _____

Name: _____
(First) (Middle Initial) (Last)

Name Request for Name Tag: _____ Shirt Size: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ - _____ Sex: M / F Age: _____ Grade: _____

Email: _____

Church: _____ Denomination: _____

Has Chrysalis been explained to you? Y / N Are you Baptized: Y / N

I agree to be respectful during this weekend:

Applicant's Signature: _____

Parent/Guardian Information

(Emergency Contact Information)

Name: _____
(First) (Middle Initial) (Last)

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ - _____ Alt. Phone: (____) _____ - _____

I give my permission for the above applicant to attend the Chrysalis Weekend:

(Signature only needed if applicant is under age of 18.)

Parent/Guardian Signature: _____

Pastor Endorsement:

I believe that the above applicant would benefit from this spiritual growth experience:

Pastors Signature: _____ Phone: (____) _____ - _____

Pastors Name (Print): _____

Sponsors Information:

Name: _____
(First) (Middle Initial) (Last)

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ - _____ Email: _____

Your Walk/Flight #: _____ Location/Year: _____

I accept my responsibilities as sponsor for the above applicant:

Sponsors Signature: _____

Medical Release Information:

Arizona Walk to Emmaus has my permission to secure the services of a Licensed medical professional for _____ in the event of an emergency, for the purpose of providing the necessary medical care, to include the admission of anesthesia. I also agree to hold Arizona Walk to Emmaus harmless from any and all claims arising from the rendering of medical services by retained professionals.

Signature of Parent or Guardian: (If applicant is under age of 18): _____

Phone: (____) _____ - _____

Doctor: _____ Phone: (____) _____ - _____

Insurance Carrier: _____ Policy #: _____

Please list any allergies to medications and or foods you may have:

Medications:

In order to provide the safest administration of your youth's medication(s), please be sure that the medication(s) is/are labeled with the following:

1. Youth's Names,
2. Name and dose of medication(s),
3. Current directions for giving the medication, including time(s) to be given and any special instruction(s), i.e., "give with food", etc.

Sending medication(s) in original container(s) with the above information in mandatory. It is essential that, if a youth is currently on routine medication(s), that he/she remain on them during the Chrysalis experience.

By signing below, you give a trained medical professional member of team to give your child over the counter medications (i.e., Tylenol, Benadryl, etc.) if needed in proper dosage for youth(s) age.

Youth(s) Name: _____

Parent(s), Guardian(s), or Youth(s) Signature (If above listed is 18)

(Signature)

(Print Name)

Date: _____

FUNDING

- 1) Please enclose a DEPOSIT FEE of \$25.00 with application. This is applied to the total contribution. This fee is non-refundable unless we do not have an opening for you.
- 2) The total requested contribution amount is \$95.00, which partially offsets the expenses of the weekend.
- 3) You will receive a free Chrysalis T-shirt during the weekend.
- 4) Make all checks payable to **Arizona Walk to Emmaus**.
- 5) Please notify us immediately if you are unable to attend at: chrysalisarizona@gmail.com
- 6) Feel free to e-mail us with any questions or concerns at the above address.

FLIGHT DATES

Dates and locations for Chrysalis Weekend Flights can be found on the AZ Walk to Emmaus website (azemmaus.org) as they are scheduled.

Please indicate which scheduled weekend date and location you are interested in attending under the Applicant Information section.

MAKE THREE COPIES OF ALL DOCUMENTS IN THIS APPLICATION

Application can be downloaded to your computer from Arizona Walk to Emmaus website: www.azemmaus.org Application can be filled out on your computer using adobe reader and then print out three copies OR Print three copies and then fill out by hand

PLEASE READ AND COMPLETE ALL DOCUMENTS IN THIS APPLICATION.

- 1) Keep one completed copy for yourself.
- 2) Bring one completed copy with the balance of the contribution to registration at the start of the Chrysalis weekend.
- 3) Mail one completed copy with the deposit fee at least 2 weeks prior to Chrysalis Weekend to

CHRYSLIS
c/o Arizona Walk to Emmaus
P.O Box 86309
Phoenix, AZ. 85080-6309

*** Walk in Applicants are accepted when space is available**



WHAT IS A CHRYSALIS? CHRYSALIS is the growth stage between caterpillars and butterflies. While on the surface it may look like nothing is happening, the delicate process changes a caterpillar into a butterfly with wings and beautiful colors. This symbolizes that, through the dying of self, Christ can transform us into something beautiful. We must open ourselves to Jesus for this transformation to occur.

CHRYSLIS is the name chosen for the YOUTH Walk to Emmaus because it symbolizes faith growth in the lives of youth - the spiritual growth that is necessary between adolescence and adulthood. It is a crucial time of maturing faith for discipleship. CHRYSLIS has its roots deeply planted in its parent movement, the Walk to Emmaus.

CHRYSLIS is a three-day spiritual renewal retreat that provides participants an opportunity to learn more about faith, to experience Christian love and support, and a chance to make new commitments in their faith journey. The content of the three days focuses on God's grace, how one experiences Christ as friend in the body of Christ, and how one is called into discipleship giving love to a needful world.

WHAT HAPPENS AT CHRYSALIS? You will spend three days with other young people in worship, prayer, fellowship, recreation, singing and discussion. You will experience the love of Christ through the prayers and acts of service of a loving support community. You will hear talks given by youth and adults focusing on the needs of maturing youth and offering the message of the Gospel and the friendship and example of Jesus Christ. Five talks are given each day followed by discussion and reflection on how these messages can be helpful to our personal faith. You will explore how this friendship with Jesus can help you live your faith with family, friends and community.

WHAT HAPPENS AFTER CHRYSALIS? Following the three-day retreat, or "Flight", you are invited to become intentional about your faith through local church participation, small group studies, and interpersonal sharing groups that provide the fellowship and support for giving love to a needful world. You are invited to rise to a new day, every day.

WHAT IS THE PURPOSE OF CHRYSALIS? CHRYSLIS is for the development of Christian youth who: • wish to strengthen their friendship with Christ; • may have unanswered questions about prayer, study and sharing their faith; • understand that being a friend of Christ, or Christian involves responsibility; • are open to dedicating their everyday life to God in an ongoing manner. CHRYSLIS is open to young people who are at least 15 years old/or a junior in high school (up to age 23) of any denomination.

ARE YOU INTERESTED? We invite you to join in an exciting three days spent in meeting Jesus Christ as your friend who comes to you in God's love as expressed through other Christians.

WE INVITE YOU TO RISE TO A NEW DAY!

CHRYSALIS PHOTO & INFORMATION

PLEASE PRINT

ARIZONA WALK TO EMMAUS HAS MY PERMISSION FOR:

ON CHRYSALIS FLIGHT # _____, HELD ON _____
(Information above may be left blank if you do not know weekend information)

TO BE INCLUDED IN THE FOLLOWING FOR PARTICIPANTS IN THIS WEEKEND
(**CHECK ALL THAT YOU AGREE TO**):

- A GROUP AND TABLE GROUP PHOTO FOR THE PURPOSE OF PROVIDING MEMORY PHOTOS AND DIRECTORY OF THIS CHRYSALIS. I UNDERSTAND THAT NO INDIVIDUAL PHOTO WILL BE TAKEN.
- PLACEMENT OF HIS/HER NAME, ADDRESS, PHONE NUMBER, E-MAIL & INDIVIDUAL PHOTO IN A CHRYSALIS WEEKEND MEMORY DIRECTORY LIST.
- PLACEMENT OF ONLY HIS OR HER NAME AND E-MAIL ADDRESS IN A CHRYSALIS WEEKEND MEMORY DIRECTORY LIST.
- PLACEMENT OF ONLY HIS OR HER NAME IN A CHRYSALIS WEEKEND MEMORY DIRECTORY LIST.
- DO NOT PLACE ANY INFORMATION IN THE DIRECTORY.**
- DO NOT INCLUDE HIM OR HER IN ANY GROUP OR TABLE GROUP MEMORY PHOTOS.**

SIGNATURE OF PARENT/GUARDIAN:

PRINT NAME OF PARENT/GUARDIAN:

DATE: _____ PHONE: (_____) - _____ - _____

All information of each individual person will be only used for the Arizona Walk to Emmaus/Chrysalis Experience. No other use of this information will be allowed.

PARTICIPANTS NEED TO BRING THE FOLLOWING:

- Casual and comfortable clothes and shoes
- Sleeping bag or sheets and blankets (a cot or futon pad will be provided)
- Pillow
- Towel, soap & wash cloth
- Toiletries: shampoo, toothbrush, deodorant, etc
- Medicines (your medicine & schedule to give to a leader on the weekend)
- Application with signed medical release form if not already mailed. Be sure to include any medical or dietary needs on the form.
- Signed the attached Photo release form, if not already mailed
- Leave cash, expensive jewelry, cell phones, credit cards, iPods and laptops at home
- No watch or alarm clock is needed
- Flashlight
- Bible is optional (for your own devotions), there is no Bible study
- Note paper & pen will be provided
- Any special-need health, medicine, or comfort items
- Sweater to wear in the conference room in case you get cold
- You will not need to bring food. Plenty of food, drinks and snacks will be provided.

FLY WITH CHRIST

