



SON VALLEY CHRYSALIS APPLICATION FORM 2010



THIS FORM NEEDS TO BE COMPLETED IN **FULL** BY THE APPLICANT AND SENT TO
THE REGISTRAR

Richard Hearn: Cell: 083 302 3164 • sonchrysalis@mweb.co.za • Fax: 086 684 0027

The Registrar will confirm the Pilgrim's attendance with both the Sponsor and the Pilgrim

PLEASE KEEP THE INFORMATION FORM FOR YOURSELF

TO BE COMPLETED BY THE APPLICANT: (Please print clearly' in all the blank spaces)

NAME	
SURNAME	
DDMMYYYY	
EMAIL ADDRESS	
POSTAL ADDRESS	
RESIDENTIAL ADDRESS	
CELL NO	
TEL NO HOME	
TEL NO WORK	
HOME LANGUAGE	
CHURCH	
CURRENT INVOLVEMENT	
MINISTER	

Male
 Female
 Single
 Married
 Divorced
 Widowed

Scholar
 Student
 Working
 Grade/Year/Type of work _____

2010 Chrysalis Dates at eMseni, Benoni

Please indicate which walk you would like to serve on:	Diarise and please tick appropriate box:	
Young Ladies #65 - 15yrs upwards to 28 years on discretion of Sponsor	17 th - 20 th June	
Young Men #66 - 15yrs upwards to 28 years on discretion of Sponsor	24 th - 27 th June	

PLEASE CONTINUE OVERLEAF



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Please specify any special conditions that may affect your Chrysalis experience; i.e. special medical conditions, handicap, special medication, special diets, allergies etc.:

Your Church name and denomination: _____

Briefly state your current church involvement (include if you sing or play any musical instruments):

State briefly why you wish to attend Chrysalis:

While you are on CHRYSALIS, it may be necessary to contact a friend or family member. Please give us the names and telephone numbers of three close family members or friends:

1. Name _____ Tel. No. (_____)
2. Name _____ Tel. No. (_____)
3. Name _____ Tel. No. (_____)

SIGNATURE OF APPLICANT

DATE OF APPLICATION

INDEMNITY (To be signed by parent/guardian if under 21):

Son Valley, Chrysalis or any associated organisation, does not take any responsibility for any loss or injury during the Chrysalis Journey/Flight.

Signed: _____ Relationship: _____

TO BE COMPLETED BY THE APPLICANT'S HOME CHURCH MINISTER/PASTOR:

Name: _____ Signature: _____



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TO BE COMPLETED BY THE SPIRITUAL SPONSOR:

A Pilgrim's attendance at a Walk needs to be prayerfully considered and is dependent on you as a Sponsor fulfilling your obligations. Please carefully read and confirm the completion of the Sponsors Form with your responsibility to indicate that this Sponsorship has been approached appropriately.

***Spiritual Sponsor must also complete, sign and submit a confidential Spiritual Sponsor's Checklist
Applications received without the Spiritual Sponsor's Checklist will not be considered***

- The Spiritual Sponsor is someone who has already completed an EMMAUS WALK or CHRYSALIS FLIGHT/JOURNEY and who will undertake to explain the weekend, pray for the applicant and assist in the practical arrangements
- The Spiritual Sponsor must complete, sign and submit a Spiritual Sponsor's Checklist together with the Pilgrim's Application Form. Incomplete Application and Spiritual Sponsor's Checklist will render the application invalid
- The Applicants own Minister or Pastor must sign the form, in order to confirm the support for the Pilgrim by their home church. If a minister or pastor requires more details the Community Spiritual Director (CLD Barbara Underhill may be contacted on 082 455 1242)
- The cost of the weekend is R480.00 and must be explained to the applicant.
- Financial constraints should not hinder any applicant (Pilgrim) from attending the Chrysalis. Should there be any problems meeting the financial obligations, kindly contact the Registrar (Dick Hearn on 083 302 3164)
- Completed Application Forms must be sent to or in the event of a cancellation or query, please notify:
The Registrar at: [Fax: 086 684 0027](tel:0866840027) E-mail: sonchrysalis@mweb.co.za
- Closing dates for applications for Chrysalis 2010 Weekends is Monday 07th June 2010
- Cheques should be made payable to: Son Valley Emmaus Community
- EFTs or Deposits can be made to: Son Valley Emmaus Community – Standard Bank - Benoni Branch - Branch Code: 013042 – Account Number: 022419071
- A copy of the EFT or Deposit must be sent to the Registrar at: Fax: 086 684 0027 sonchrysalis@mweb.co.za

I accept the commitment as a Spiritual Sponsor and understand my responsibilities.

NAME	
SURNAME	
DDMMYY	
EMAIL ADDRESS	
POSTAL ADDRESS	
CELL NO	
TEL NO HOME	
TEL NO WORK	
CHURCH	
MINISTER	
CURRENT INVOLVEMENT	
FLIGHT/JOURNEY/WALK #	
SERVED PREVIOUSLY AS	

Sponsor's Signature: _____ Date: _____

The Registrar will confirm the Pilgrim's attendance with both the Sponsor and the Pilgrim



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FINANCIAL NOTES:

Financial constraints should not hinder any applicant from attending Chrysalis. If there are any problems, please contact the Registrar. Payments requested to be made by first choice of EFT Transfers or deposits into Banking

Account Details of: **EMMAUS SON VALLEY, STANDARD BANK,
BENONI BRANCH (013042), ACCOUNT NUMBER 022419071**

The pilgrim's fee is R480.00

Payments to be received by Monday 07th June for the 2010 Chrysalis Weekends.

FOR OFFICE USE ONLY

Date form received: _____ Walk No.: _____ Date of Walk: _____

Payment received: CASH CHEQUE No. and date _____
 EFT

Received R _____ To pay R _____ Receipt No. _____

Letter of acceptance of application: 1 _____ 2 _____

Letter for sponsor follow up: 1 _____ 2 _____

Pilgrim Confirmed attendance date/Cancelled _____ Postponed to: _____