

Elizabethtown YOUNG ADULT CHRYSALIS Request for Reservation

The Young Adult Chrysalis is a three-day experience of renewal, learning, and sharing for young adults between the ages of 18 and 25 in the atmosphere of a Christian community. Everyone experiences it differently. It is not intended to help solve deep-seated problems, but is designed to help young adults work toward a Christian way of life with community support.

TO BE COMPLETED BY THE CANDIDATE: (Then return this form to the Sponsor)

NAME: _____ **DATE:** _____

NAME for NAMETAG: _____ T-SHIRT SIZE: _____

Check One: MALE FEMALE AGE: _____ BIRTHDATE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE#: (____) _____ CELL #: (____) _____

Check One: IN COLLEGE OUT of COLLEGE

If IN COLLEGE, name of COLLEGE/UNIVERSITY: _____

Check One: MARRIED SINGLE

If MARRIED, has your spouse already attended an Emmaus or Chrysalis? YES -or- NO

CHURCH: _____ PASTOR: _____

Have Chrysalis and Reunion groups been explained to you? _____

Any special diet, food allergies, or medications? _____

State briefly why you wish to be involved in Chrysalis and what you expect from it:

Candidate's Signature: _____

The approximate cost for Chrysalis is \$70. Please make your checks payable to ELIZABETHTOWN CHRYSALIS and present your check upon arrival. Ask your sponsor about a full or partial scholarship if you need one. This is an application form and does not guarantee your acceptance, as a limited number of spaces are available. You will be notified 2-4 weeks prior to the Young Adult Chrysalis of your acceptance or placement on the waiting list.

SPONSOR: _____

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

PHONE: (day) _____ (evening) _____

Elizabethtown YOUNG ADULT CHRYSALIS Request for Reservation

Page 2

TO BE COMPLETED BY THE SPONSOR:

(A sponsor must be 18 years of age or older and have attended an Emmaus or Chrysalis weekend.)

CANDIDATE NAME: _____ **DATE:** _____

SPONSOR'S NAME: _____ CHRYSALIS/EMMAUS # _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE#: (____) _____ CELL #: (____) _____

EMAIL ADDRESS: _____

To the BEST of your knowledge, is your candidate a Christian? YES -or- NO

Please tell us about your candidate so that this weekend may be even more meaningful:

Does the candidate have the physical and mental health needed for a Chrysalis weekend? _____

Does your candidate need a full or partial scholarship beyond what you, your reunion group, or church can help with? _____

Are you willing to help the candidate get involved with a reunion group? _____

Will you bring your candidate to the Chrysalis? _____

Sponsoring a candidate is both a joy and a responsibility. It is unlikely that you can sponsor more than two candidates on one Young Adult Chrysalis effectively. There are things you must do for your candidate before, during, and after the weekend. (Please remember the importance of minimal contact with your candidate during the weekend.) You should be praying and sacrificing for your candidate. Remember also that the Young Adult Chrysalis is not structured to solve deep-seated personal problems. It is designed to provide a personal encounter with Jesus Christ.

Sponsor Signature: _____

Mail to the following:
Elizabethtown Chrysalis
PO Box 6243
Elizabethtown, KY 42702-6243