BRAZOS VALLEY EMMAUS COMMUNITY TEAM APPLICATION

Complete this form to be considered as a team member for the upcoming walk. PLEASE PRINT

Today's Date:	
Address: Email: Phone: Church: City/State: Male Female Occupation:	
Email:	
Phone: Church: City/State: DOB Male Female Occupation:	
Church: City/State: DOB Male Female Occupation:	
City/State: DOB Male Female Occupation:	
Occupation:	
Occupation:	
Clergy? (Yes/No)	
Walk Attended / Home Church / Reunion Group	
Community Name:Walk #	
Home Church:(include	city)
Reunion Group Name:	
Previous Team Service List the most recent team service first; date of service, position, talks given, e	tc.
How are you willing to serve? (Circle all that apply): Parking Thursday arrival Saturday candlelight Sunday closing Greete	or
, , , , , ,	
Registrar support Candlelight Thursday Set-up Sunday clean-up Kitch	ıen
Conference Room Team Outside Team	
Other:	
Just in Case!	
Emergency Contact Name:	
Emergency Contact Phone:	

Share additional information on the back if necessary