

TIDEWATER EMMAUS TEAM APPLICATION

Walk Dates: TW-115 Men **Apr. 19 – 22, 2018**
 TW-117 Women **May 3 – 6, 2018**

Name: _____ Original Walk: _____
 (Please print clearly in all areas of the address and phone number(s))

Address: _____ City: _____

State: _____ Zip: _____ Home Phone: _____ Cell Phone: _____

E-mail: _____ Spouses Name: _____

Church you attend & your involvement: _____

Do you play a musical instrument? Yes _____ No _____ (if yes, what instrument) _____

Please answer **all of** the following questions:

1. I am applying to be a member of the team on TW _____
2. Have you attended a Day of Deeper Understanding? Yes _____ No _____
3. Are you active in a Reunion/Accountability Group? Yes _____ No _____
4. Do you attend gatherings on a regular basis? Yes _____ No _____
5. Have you served on a community service team (CST)? Yes _____ No _____
6. Are you interested in progressive servanthood? Yes _____ No _____
7. List previous team experience as follows, enter "none" if appropriate:

Walk Number	Position Held	Talk Given

(Continue on another sheet of paper if you have more teaming experience to list. **Please be specific.**)

*Please prayerfully consider your participation on the weekend in the role of Christ's servant. By applying you are stating that you will do whatever God asks during this weekend and can commit to attend the teaming meetings (typically 8 sessions). **The team fee is \$200.00. Teaming fees are due with your application.** Also, there are some minimal expenses associated with the weekend above that fee. All are welcome to serve on a team and if you need financial help please contact the Weekend Lay Director about your needs. **Husbands and wives must submit separate applications. Fees will be returned if not selected for the team. Refunds will only be given up to 14 days prior to the weekend.***

 Signature of Applicant

 Date

Please mail applications to:

**Tidewater Emmaus Teaming
 P.O. Box 61485
 Virginia Beach, VA 23466-1485**

Applicant selected for Team: Yes / No Application Date Received: _____ Pd# _____