



East Central Indiana Emmaus / Chrysalis Community, Inc.

Chrysalis Application And Sponsor Form

East Central Indiana Chrysalis Flights (For Youths ages 15 - 18 or 10th Grade through 12th Grade)

Applicant Information (Please Print)

Date of Application _____ T-Shirt (S M L XL XXL) _____ (Male Female)
Name _____ Preferred Name for Name Tag _____
Address _____ City, State ZIP _____
Phone _____ Email Address _____
School Now Attending _____ Current / Completed Year _____ Birthday _____
School Activities _____
Home Church _____ Pastor's Name: _____
Church or Community Activities _____
Applicant's Signature _____

Preparatory Questions

Has the *Chrysalis* weekend been explained to you and your parents / guardians? (Yes No)
Have the follow-up gatherings been explained to you? (Yes No)
State briefly why you wish to participate in Chrysalis and what you expect from it: _____

Parental Information

_____ has my permission to attend the Chrysalis weekend. In the event of an emergency and I cannot be reached by phone, the Chrysalis staff has my permission to secure the services of licensed medical professionals to provide the care necessary, including anesthesia, for my child's wellbeing. I further do hereby release and discharge the ECI Emmaus/ Chrysalis Board and their members from any and all liability from illness, injuries, and damages that may arise out of or resulting from my child's participation in or traveling to or from this event.

Parent / Guardian Name (Printed): _____

Parent / Guardian Signature: _____ Date: _____

Applicants under 18 must have parent / guardian signature

If an emergency arises, I can be reached at:

Home Phone: _____ Work Phone: _____ Cell Phone: _____

If I cannot be reached, please call: _____ Relationship: _____ Phone: _____

I give permission for ECI Emmaus/Chrysalis Board to publish the applicant's name, sponsors name and church affiliation in its newsletter and postings on its website. (Yes No)

Completed Applications

Please enclose a non-refundable deposit of \$20. This will be applied towards your contribution of \$60 which partially offsets the expenses for the weekend. This deposit is non-refundable unless there are no openings for you. Please make checks payable to *East Central Indiana Emmaus / Chrysalis Community, Inc.* You will be notified of your acceptance and the date, location, and time of your Flight. Please notify your sponsor immediately if you are not able to attend this Flight, as others may be on a waiting list. **You must have an Emmaus / Chrysalis Sponsor.** Please mail this completed application and your non-refundable \$20 registration deposit to:

East Central Indiana Emmaus / Chrysalis Community, Inc.

Attn: Registrar

P.O. Box 2004

Muncie, Indiana 47307-0004



East Central Indiana Emmaus / Chrysalis Community, Inc.

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East Central Indiana Chrysalis Sponsor's Form

To be filled out by the sponsor

Sponsor Information (Please Print)

Sponsor's Name _____ Phone _____
Address _____ Work Phone _____
City _____ State _____ Zip _____ Email address _____
Church you attend _____ Walk / Flight you attended _____
Are you in a Reunion Group? (Yes No) Do you attend gatherings? (Yes No)

Sponsor Responsibilities

Have you fully explained Chrysalis to your applicant? (Yes No)
Have you fully explained Chrysalis to his/her Parents/Guardians? (Yes No)
Will you assist your applicant in establishing a Reunion Group or similar support Group? (Yes No)
Will you pray and sacrifice for your applicant? (Yes No)
Will you bring your applicant to the Flight Send-Off? (Yes No)
Will you attend the Sponsor's Hour, Candlelight, and Closing? (Yes No)
Will you bring your applicant to the Follow-up meeting, when it is held? (Yes No)
Will you bring your applicant to the Chrysalis Rush/Emmaus Gatherings? (Yes No)
If your answer is "No" to any of the above questions, will you arrange for a person to fulfill your responsibilities in these areas? (Yes No)

Special Needs of Applicant

Does your applicant have the physical and mental health needed to attend this weekend? (Yes No)
Is your applicant under any temporary emotional strain that might indicate that participation should be postponed for a later weekend? (Yes No)
Have the Parents/Guardians of your applicant participated in Emmaus or Chrysalis? (Yes No)
Are there any additional circumstances concerning this applicant which the team should be aware of? (Yes No)
If "yes", please explain: _____

Sponsor Reminder

Sponsor, please remember that the Chrysalis Weekend is an intense program of Christian study and spiritual growth. It is **not** a weekend retreat or cure-all. It is good if the applicant is active in church and desires an opportunity to grow in Christ and enhance their participation in church.

Sponsor's signature _____ Date _____
