

**Central Mississippi Walk to Emmaus  
Sponsor Sheet**

**To Be Completed by Sponsor**

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Candidates

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_ Telephone: (    ) \_\_\_\_\_

Sponsor's Name: \_\_\_\_\_ Address: \_\_\_\_\_ E-Mail: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Telephone: (    ) \_\_\_\_\_

Name & Denomination of Church now Attending: \_\_\_\_\_

Do You Attend Regularly: \_\_\_\_\_

Where did you make you Cursillo/Walk to Emmaus: \_\_\_\_\_

When: \_\_\_\_\_ Cursillo/Emmaus# \_\_\_\_\_

Are you now in a group reunion/Emmaus Group: \_\_\_\_\_

How many candidates have you sponsored in the last year: \_\_\_\_\_

Are you praying and sacrificing for your candidate: \_\_\_\_\_

Do you received the newsletter: \_\_\_\_\_

How long have you known the candidate: \_\_\_\_\_

Why do you feel that this person would be a good candidate: \_\_\_\_\_

Does the candidate have the physical and mental health needed for a Walk to Emmaus weekend: \_\_\_\_\_

Is the candidate under any temporary emotional strain that might indicate his/her weekend should be postponed: \_\_\_\_\_

Are you able and willing to assist the candidate to get into an Emmaus group: \_\_\_\_\_

Will you bring your candidate to the Emmaus site: \_\_\_\_\_

Attend the Sponsor's Hour: \_\_\_\_\_ Candlelight: \_\_\_\_\_ Closing: \_\_\_\_\_

Can you care for the needs of your candidate's spouse over the weekend: \_\_\_\_\_

Have you explained the post-weekend meeting: \_\_\_\_\_

Are you aware of the importance of minimal contact with your candidate during the weekend, especially if the candidate is your spouse:

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Please mail completed form to:

**Sandra Reid  
130 Hunt Circle  
Madison, MS 39110  
emmauspilgrim@gmail.com**

