

CAMPBELLSVILLE CHRYSALIS REQUEST FOR RESERVATION

Chrysalis is a three-day experience of renewal, learning, and sharing 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 youths and young adults work toward a Christian way of life with community support.

This application is for: **High School Chrysalis** _____ **Young Adult (College Age) Chrysalis** _____
(Check one)

TO BE FILLED OUT BY THE CANDIDATE

(Then return this form to your sponsor)

NAME _____ NAME FOR NAME TAG _____

ADDRESS _____ Phone () _____

CITY/STATE/ZIP _____ Email _____

Male ___ Female ___ Age ___ Birthdate _____ T-SHIRT SIZE _____

School _____ HS _____ College _____ Univ. _____ Year In: Soph Jr Sr
Circle one Circle one

Church _____ Pastor _____

Do you require a special diet? if so, explain _____

Do you have allergies? if so, explain _____

Do you take medication? if so, explain _____

Do you have a disability that we need to be aware of? if so, explain _____

Do you require special sleeping accommodations? If so, explain _____

Have Chrysalis and Reunion groups been explained to you? _____

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

Candidate's Signature _____ Date: _____

If you are under 18 years old, a parent or guardian signature is required.

The undersigned parent or guardian of the above candidate consents to my child or ward participating in a Chrysalis weekend. I also authorize any adult Chrysalis team member to act as agent for me and to consent to any medical or surgical treatment for my child or ward at a hospital, clinic, or doctor's office in the event of a medical emergency during the Chrysalis weekend.

Parent/Guardian Signature: _____ Date: _____

Candidate selection preference will be given to seniors, juniors and sophomores who are also 15 years of age. **The cost for Chrysalis is \$70.00.** We request a \$10.00 registration fee, (non-refundable), which should be given to your Sponsor along with your completed application. The remaining amount will be collected at the Registrar's table upon arrival. Make checks payable to Campbellsville Emmaus Community. If you need financial assistance with this registration cost, please notify your sponsor so they can help cover this. This is an application form and does not guarantee your acceptance, as a limited number of spaces are available. You will be notified several weeks prior to the Chrysalis of your acceptance or placement on the waiting list.

Sponsor Name _____ Phone _____ email _____

Your Candidate's Name: _____

THIS SECTION TO BE FILLED OUT BY THE SPONSOR

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

Sponsor's Name _____ Phone _____

Address _____

City/State/Zip _____ Email _____

Your Walk/flight Number _____

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

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

To the best of your knowledge is your candidate a Christian? _____

Will YOU bring your candidate to the Chrysalis? _____

Will YOU (or your reunion group, or church) help by providing the cost of your candidate's registration fee if this is needed by your candidate? _____

Are YOU willing to help the candidate into a reunion group? _____

Are YOU willing to help them attend youth events and participate in the events of the Campbellsville Emmaus/Chrysalis Community? _____

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

Sponsor Signature: _____ Date: _____

Mail this application to: **Lisa Benningfield, Chrysalis Registrar**
103 De Chaunac Circle
Campbellsville, KY 42718