

# 2026 HAWAII WALK TO EMMAUS APPLICATION FORM

Men's Walk, June 4-7, 2026

Women's Walk, August 20-23, 2026

\*\*\* TO BE FILLED OUT TOGETHER BY PILGRIM AND SPONSOR \*\*\*

ALL INFORMATION BELOW IS NECESSARY FOR PROPER PLACEMENT IN A WALK TO EMMAUS

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

Home Phone \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Name you would like on your nametag \_\_\_\_\_

Name and denomination of church now attending \_\_\_\_\_

Do you attend regularly? Yes \_\_\_\_\_ No \_\_\_\_\_

Age Group 18-25 \_\_\_\_\_ 26-45 \_\_\_\_\_ 46-55 \_\_\_\_\_ 56-65 \_\_\_\_\_ 66-75 \_\_\_\_\_ 76+ \_\_\_\_\_

Marital Status \_\_\_\_\_ Spouse's Name \_\_\_\_\_ Has spouse been on a Walk? Yes \_\_\_ No \_\_\_

Name of a close friend \_\_\_\_\_ phone # \_\_\_\_\_ email \_\_\_\_\_

Name of a relative \_\_\_\_\_ phone # \_\_\_\_\_ email \_\_\_\_\_

**ARE YOU ON A SPECIAL DIET?** No \_\_\_ Yes \_\_\_ If yes, please attach or describe a typical menu.

**If you are on special medication, have a health problem or physical handicap or allergy that may affect your attendance at the Walk to Emmaus, please specify:** \_\_\_\_\_

Could you attend on short notice (3-4 days)? \_\_\_\_\_ Do you snore? \_\_\_\_\_ Do you smoke? \_\_\_\_\_

**NOTE:** Participation requires going from one building to another. Are you able to climb one flight of stairs? \_\_\_\_\_

**Has the Walk been explained to you, including the post Walk follow up?** \_\_\_\_\_ Yes \_\_\_\_\_ No

Your signature \_\_\_\_\_ Date \_\_\_\_\_

Your Pastor's Name & Church name \_\_\_\_\_

Pastor's acknowledgement: (signature) \_\_\_\_\_ email \_\_\_\_\_

*Please clear your calendar for the weekend from 6:00 pm Thursday to 6:00 pm Sunday. In the event you must cancel, please notify your sponsor immediately.*

## SPONSOR TO FILL OUT THIS SECTION

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

Main Phone \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Work Phone \_\_\_\_\_ Email \_\_\_\_\_

Church now attending \_\_\_\_\_ Do you attend regularly? \_\_\_\_\_

When/where did you make your Walk? \_\_\_\_\_

Do you attend Emmaus community gatherings? \_\_\_\_\_ Have you received sponsorship training? Yes \_\_\_ No \_\_\_

How long have you known the pilgrim? \_\_\_\_\_ My pilgrim needs a scholarship. Amount? \$ \_\_\_\_\_

Why do you feel this person would be a good pilgrim? \_\_\_\_\_

If the pilgrim is married, have you discussed Emmaus with the spouse? \_\_\_\_\_

Will you bring the pilgrim to the Walk and pick him/her up afterwards? \_\_\_\_\_

Can you care for the needs of the pilgrim's family over the weekend? \_\_\_\_\_

Are you aware of the importance of minimal contact with your pilgrim during the weekend? \_\_\_\_\_

Sponsor's signature \_\_\_\_\_ Date \_\_\_\_\_

**The total registration fee is \$195. To reserve a space as a Pilgrim, submit this completed form with the pre-registration fee of \$40.00 by May 5, 2026, for Men's Walk, July 20, 2026, for Women's Walk to:**

**HUMU Walk to Emmaus, ATTN: Registrar, 20 South Vineyard Blvd, Honolulu, HI 96813.**

**Make checks payable to HUMU. Write Walk to Emmaus on the memo line. The balance may be paid upon check-in.**

For office use: Date \_\_\_\_\_ Check # \_\_\_\_\_