



Sponsor page for Pilgrim Application

Pilgrims Name _____

Sponsor's Name _____

Sponsor's Address _____

City _____ State/Zip _____ Telephone (____) _____

Are you in a Reunion Group? Yes () No () Weekly? () Location _____

Please tell why you have chosen this Pilgrims to attend a weekend _____

Will you take your pilgrim to the weekend? Yes () No () Will you attend the Sponsor's Hour? Yes () No () Will you attend Candlelight Yes () No () Will you attend Clausura? Yes () No (). Will you follow up with your pilgrim and select a reunion group for them? Yes () No () Will you take them to the Ultreya after the weekend? Yes () No () Please return this application along with the pilgrim application to the Parish Rep Liaison - Bill & Nanette Young, 4777 Currie Lake Rd., Harshaw, WI 54529

Signature _____ Date _____

Clergy: Do you know this person? Is this applicant a member of your church? Is this person qualified to participate in a Via de Cristo weekend? Please endorse the application for this weekend if you feel they are qualified.

Name (print) _____ (sign) _____

Church _____ Date _____