



Northern Light Via de Cristo Application

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Name for Name Tag \_\_\_\_\_

Church you attend \_\_\_\_\_ City \_\_\_\_\_

Birth Date \_\_\_\_\_ Baptism Date (required) \_\_\_\_\_

Gender (M) (F)..... Marital Status: Married ( ) Single ( ) .....

Clergy ( ) Clergy Spouse ( ) Lay Person ( ) .....

Do you have a handicap, medical or dietary condition that needs special attention on the weekend? If so please describe \_\_\_\_\_  
\_\_\_\_\_

Please list a friend or family member other than your Spouse to contact in case of an emergency. \_\_\_\_\_ Phone \_\_\_\_\_

How did you become interested in Via de Cristo? \_\_\_\_\_  
\_\_\_\_\_

Your sponsor's name \_\_\_\_\_

A weekend fee of \$75.00 is required with the application for each participant.

This application is to be returned to your sponsor.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_