heartofohioemmaus.org

"Then their eyes were opened and they recognized Him..." - Luke 24:31a (NIV)

The Heart of Ohio Emmaus and Chrysalis Community

What is The Walk To Emmaus?

The Walk to Emmaus is a spiritual renewal program intended to strengthen the local church through the development of Christian disciples and leaders. The program's approach seriously considers the model of Christ's servanthood and encourages Christ's disciples to act in ways appropriate to being "a servant of all."

The Walk to Emmaus experience begins with a 72-hour short course in Christianity, comprised of fifteen talks by lay and clergy on the themes of God's grace, Christian discipleship, and what it means to be the church. The course is wrapped in prayer and meditation, special times of worship, and daily celebration of Holy Communion. The "Emmaus community," made up of those who have attended an Emmaus weekend, support the 72-hour experience with a prayer vigil, by preparing and serving meals, and other acts of love and self-giving. The Walk to Emmaus typically begins Thursday evening and concludes Sunday evening. Men and women attend separate weekend events.

During and after the three days, Emmaus leaders encourage participants to meet regularly in small groups. The members of the small groups challenge and support one another in faithful living. The three-day Emmaus experience and follow-up groups strengthen and renew Christian people as disciples of Jesus Christ and as active members of the body of Christ in mission to the world.

The program, an offering of The Upper Room, invites and involves the participation of Christians of many Christian faith traditions. Emmaus is ecumenical not only because members of many faiths participate, but also because Emmaus seeks to foster Christian unity and to reinforce the whole Christian community. This is one of the great strengths and joys of the Emmaus movement. The fact that Emmaus is ecumenical does not mean it is theologically indifferent. On the contrary, the Walk to Emmaus is designed to communicate with confidence and depth the essentials of the Christian life, while accentuating those features that Christians have traditionally held in common.

Section 1 – Registration - to be completed by the candidate

Please PRINT all information CLEARLY

Indicate which weekend walk you would prefer to attend. Specific weekend choices are subject to availability.

Women's Walk

_____ Oct. 14-17, 2026 #79

Men's Walk

_____ March 11-14, 2027 #64

The cost of the three day event, which includes lodging and meals, is $250. A $25.00 non-refundable deposit is due at registration. If financial support is needed consider asking your sponsor, church, family or Christian friends to support you for this weekend where faith is renewed and you are equipped for Christian service. Give your completed application to your sponsor. Your deposit may be paid online (https://heartofohioemmaus.org/give/) or sent directly to our registrar. See Section 4. Refunds, minus the deposit, will be given for cancellations up to one week from the start of the event. No refunds can be given within one week of the start of the event.

First & Last Name: _____ Name for Name Tag (if other than first name) _____

Street Address_____ City, State, ZIP: _____

Email Address: _____ Home Phone #: (____) _____ Cell Phone #: (____) _____

Birth Year: _____ Name of church you are now attending: _____

City: _____ Pastor's Name: _____Church Phone (_____) _____

Close Friend: _____ Friend's Phone (_____) _____

Has the Heart of Ohio Emmaus Walk been explained to you? _____ And to your spouse (if applicable)? _____

State briefly why you want to be involved in the Emmaus community and what you expect from it. _____

_____

_____

Medical Information in Case of Emergency

Medications taken _____

Special dietary needs _____

Allergies: _____

Do you have a health problem or physical limitation that may affect your attendance at Emmaus? _____?

If so, please specify: _____

_____

Medical Insurance Provider: _____

Medical insurance policy # _____

The principal insured on my medical insurance policy is: _____

My medical insurance provider can be reached at (Phone):_____

In case of an emergency, you can call: _____

Relationship to participant:_____ Phone: _____

Release of Liability

I, the undersigned, have voluntarily decided to participate in an event called Walk to Emmaus at Camp Otyokwah, Butler, Ohio sponsored by Heart of Ohio Emmaus. I agree that I am assuming all risks of any injury to me or damage to property as a result of my participation in this event. I hereby release Heart of Ohio Emmaus, Camp Otyokwah, The Upper Room and their members, directors, officers, and agents from any and all liability of any kind resulting from any injury to me or damage to any of my property while I am participating in the event. I further agree to indemnify and save and hold harmless Heart of Ohio Emmaus, Camp Otyokwah, The Upper Room and their members, directors, officers, and agents from any and all claims or demands arising out of or a result of my participation in this event.

I, the undersigned, also hereby authorize any member director, officer or other agent of Heart of Ohio Emmaus, who is assisting in the event, to assist me in seeking any emergency medical attention that I may require while participating in the event, with the understanding that neither Heart of Ohio Emmaus nor its members, directors, officers or agents are required to assist me with any emergency medical attention which may be required while I am participating in the event.

I certify that the information I have provided is correct, and I have voluntarily executed the Release of Liability Form.

Signature: _____

Printed Name: _____ Date:_____

Section 3 – To be completed by Sponsor

Please PRINT all information CLEARLY

The cost of the event is $190. A $25.00 non-refundable deposit is due at registration. Ensure payment responsibilities are understood with your pilgrim. If necessary, work with your pilgrim to secure additional financial support either through your sponsorship, the pilgrim's church, family or Christian friends. Heart of Ohio Emmaus has limited scholarship funds. Some payment will be required on behalf of the pilgrim to cover a portion of the event expense. Contact a board member or the board Treasurer if assistance is needed. See Section 3 below for registration and payment information. Refunds, minus the deposit, will be given for cancellations up to one week from the start of the event. No refunds can be given within one week of the start of the event.

Please review application and correct any personal information that is not printed CLEARLY. **Specific weekend choices are subject to availability.** Applicants will be contacted by letter prior to the Walk weekend when an opening becomes available for that specific weekend. After confirmation is received, the sponsor will receive an information packet to share with the applicant to assist him/her in the decision to attend a weekend, to help him/her to enter fully into the Emmaus fellowship following the Walk, and to provide prayer, other support, and transportation to/from the weekend facility.

Sponsor's Name: _____

Street Address: _____ City, State, ZIP: _____

Home Phone #: (_____)_____ Cell #: (_____)_____ Email: _____

Community, #, & Date of Sponsor's 3-Day Weekend: _____

Please verify the following statements are true by initialing each line.

_____ I will respond promptly to the sponsorship packet from the Registrar.

_____ I will be able to bring my pilgrim to Registration/Send-Off on Thursday evening of the walk weekend and will bring a covered dish to share.

_____ I will attend Sponsor's Hour on Thursday evening, following Send-Off on the Thursday evening of the walk weekend.

_____ I will attend Candlelight and Closing of the walk weekend. I can also arrange transportation home for my pilgrim.

_____ I will see to the special needs of the pilgrim's family during the walk weekend.

_____ I will collect at least 12 agape letters from close friends and relatives and deliver them to camp for the weekend.

_____ I will take my pilgrim to the first Gathering following their walk.

_____ I will assist my pilgrim in finding a Share group or starting a new one (if other share groups are unavailable).

_____ I understand responsible sponsorship is vital to every Emmaus community and that wise sponsorship should be purposeful and prayerful.

If you are serving on team, or are unable to fulfill all duties of the sponsor, please list your co-sponsor below:

Name: _____ Phone: _____ Email: _____

Please be sure your co-sponsor is aware of all above-stated requirements.

Sponsor's Covenant Agreement

I am making this covenant to volunteer and to be a willing servant on the walk. I will serve in one or more of these areas: Meal serving; Agape; Prayer Vigil; or Food Contributions.

Sponsor's signature: _____ **Date:** _____

Section 4: Mail Completed Form

Registration: Vince Brown, 456 Dogwood Ln Mount Gilead, OH 43338, 419-560-6662, Email: vlbrown321@gmail.com

Please attach a non-refundable $25.00 deposit that will be applied toward the cost of $190.00; the $165.00 balance is due Thursday night of the Walk. Make checks payable to HEART OF OHIO EMMAUS. Your deposit may be paid online or sent directly to our treasurer. See https://heartofohioemmaus.org/give/ for instructions. Each applicant will be personally confirmed for a particular weekend according to space.

(Registrar's Use) Date Received: _____/_____/_____ Check #: _____ Amount Paid: $_____

Acknowledgment Sent: _____/_____/_____

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