

Chrysalis C.A.R.E.S.

(Serving the Greater Columbus, New-Ark Area, and Reynoldsburg Emmaus Communities)

REGISTRATION FORM

Please complete the information below so we can best meet your needs on your Chrysalis weekend. All information will stay completely confidential. Upon completion, return the form to your sponsor.

Name: _____ Name for Nametag: _____

Address: _____ T-shirt size: _____

City: _____ State: _____ Zip: _____ Date of Birth: _____ Age: _____

Phone: (____) _____ Email: _____

School you presently attend: _____ Grade: _____ Graduation Year: _____

Parents' names: _____

Parents' address(es): _____

Parents' phone #(s): _____ Parents Email: _____

Name/denomination of Church you attend: _____ Pastor's name: _____

Church address: _____ City: _____ State: _____ Zip: _____

Church, school, or community activities you are involved in: _____

Has the Chrysalis weekend been explained to you? _____ The follow-up activities? _____

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

Please list any allergies (medical, food, etc.), medications, special diet, medical problems, etc.: _____

Sponsor's Name: _____

Emergency contacts (if above cannot be reached): _____ Phone: (____) _____

_____ Phone: (____) _____

Your signature: _____ Date: _____

*The Registration Fee 65.00 which partially offsets the expense of the weekend is due at Check In when you arrive for the weekend. Make check payable to **CHRYSALIS C.A.R.E.S.** The back of this application must be completed by your sponsor before it is submitted. Thank you!*

FOLLOWING TO BE COMPLETED BY PARENT OR GUARDIAN (Required if candidate is under 18)

_____ has my permission to attend the Chrysalis weekend. In the event of an emergency and I/we cannot be reached by telephone, the Chrysalis staff has my permission to secure the services of licensed medical professionals to provide the care necessary, including anesthesia, for my child's well-being.

I also grant permission to Chrysalis C.A.R.E.S. to use photograph(s) for placement on their Web Site, www.chrysaliscare.org or other promotional materials. I agree I will not receive any compensation for its use.

Signature of Parent/Guardian _____ Phone (____) _____

UPCOMING WEEKENDS (check preference)

Girls' / Young Women's

Boys' / Young Men's

___ Girls' - June 26 - 28, 2010

___ Boys' - July 24 - 26, 2010

___ Girls' - January 15 - 17, 2011

___ Boys' - February 19 - 21, 2011

(Chrysalis C.A.R.E.S. Weekends are Saturday 8:00 am - Monday 8:00 pm)

INFORMATION TO BE COMPLETED BY SPONSOR

Name of Caterpillar: _____

Sponsor's Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone: (_____) _____

Sponsor's E-Mail Address _____

(Most correspondence will be conducted via e-mail to expedite the process and reduce expenses to Chrysalis)

Church you attend: _____

Do you attend regularly? _____ Have you served as a sponsor before? _____

Where did you attend your Emmaus/Chrysalis/Cursillo? _____ Walk/Flight# _____

Are you in a Share Group? _____ Would you like to receive the Chrysalis email updates? _____

How long have you known your candidate? _____

Why do you think this person would benefit from the Chrysalis weekend? _____

Does your candidate have any physical or mental health concerns that the Spiritual Director or the Lay Director should be aware of?

The following are some of your responsibilities as this Caterpillar's sponsor. Please read each one and indicate that you understand it (initial, check, etc.).

- To pray and sacrifice for the Caterpillar. _____
- To provide, or personally arrange for, transportation for the Caterpillar to and from the weekend. _____
- To attend Sponsor's Hour (or to inform the Spiritual Director that you cannot). _____
- To attend weekend events on behalf of your Caterpillar. _____
- To explain Hoots, Gatherings, and Share Groups. _____
- To accompany the Butterfly to the first Gathering after the Flight. _____
- To help the Butterfly find a Share Group (Community Reps will also help with this). _____
- Maintain minimal contact with your Caterpillar during the weekend. _____
- Confirm the Caterpillar has a free schedule from Saturday 8am – Monday 8pm for their weekend. _____

Please make any additional comments you believe may be helpful. _____

You will receive further information concerning your responsibilities and a reference form to complete when this form has been received. Sponsoring a person to Chrysalis is a wonderful act of love!

Please send completed form to:

Boy's Community Registrar:

Steve Smith
4669 Allison Road
Mechanicsburg, Ohio 43044
(937) 207-8750
chrysalisapplications@gmail.com

Girl's Community Registrar:

Valerie Smith
4669 Allison Road
Mechanicsburg, Ohio 43044
(937) 207-8751
chrysalisapplications@gmail.com

or Fax to Chrysalis C.A.R.E.S. --- 614-633-1035

PLEASE FEEL FREE TO MAKE AND DISTRIBUTE COPIES OF THIS FORM!

(Rev. 5/10)