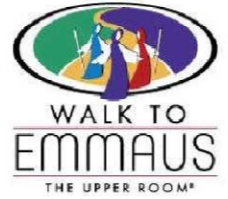




Return completed form to:  
 DaySpring Emmaus Community  
 P.O. Box 681  
 New Albany, IN 47151-0681



## DaySpring Emmaus Service Sheet

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
 \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ E-mail Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Walk No. & Location: \_\_\_\_\_  
 Church: \_\_\_\_\_

**As an act of agape, I would like to serve the work of the Lord in these areas on the Emmaus Walk**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Agape Team                    | <input type="checkbox"/> Table Leader                         | <input type="checkbox"/> Assistant Table Leader-Speaker                     |
| <input type="checkbox"/> Kitchen Team                  | <input type="checkbox"/> Entertainment for Saturday Nights    | <input type="checkbox"/> Computer <input type="checkbox"/> PowerPoint Agape |
| <input type="checkbox"/> Music Team                    | I can:  | <input type="checkbox"/> Sound Technology                                   |
| I Play:  | <input type="checkbox"/> Sing                                 | Specify experience: _____   |
| <input type="checkbox"/> Keyboard                      | <input type="checkbox"/> Performing skit or comedy routine    |   |
| <input type="checkbox"/> Guitar kind: _____            | <input type="checkbox"/> Playing music (please specify) _____ |   |
| <input type="checkbox"/> Bass                          | <input type="checkbox"/> Other (please specify) _____         | <input type="checkbox"/> Scholarship Donation                               |
| <input type="checkbox"/> Drums                         |   | <input type="checkbox"/> Emmaus Pilgrim (\$125)                             |
| <input type="checkbox"/> Other (Please Specify): _____ |   | <input type="checkbox"/> Emmaus Team Member (\$125)                         |

**\*Clergy Members there is a special application for you.**

Have you served on a previous Emmaus Walk?  Yes  No

If yes, please check positions you held on the Emmaus Walk, dates, and walk no.

(Chrysalis,, REC, Power Ministries are on the back page)

Position Held	Walk No., Date & Ministry	Position Held	Walk No., Date & Ministry
<input type="checkbox"/> Lay Director:	_____	<input type="checkbox"/> Agape Team:	_____
<input type="checkbox"/> Asst. Lay Director:	_____	<input type="checkbox"/> Agape Team Leader:	_____
<input type="checkbox"/> Table Leader:	_____	<input type="checkbox"/> Kitchen Team:	_____
<input type="checkbox"/> Asst. Table Leader:	_____	<input type="checkbox"/> Kitchen Team Leader:	_____
<input type="checkbox"/> Music Team:	_____	<input type="checkbox"/> Clergy:	_____

### Talks Given

\_\_\_\_\_  
 \_\_\_\_\_

Please note: Completing this form only indicates your interest in serving and does not guarantee your selection to serve on any team