

CANDIDATE'S APPLICATION FOR EVANSVILLE AREA



Evansville Chrysalis
Attn: Registrar
PO Box 101
Evansville, IN 47701-0101

FLIGHT

HIGH SCHOOL

registrar@evansvillechrysalis.com

Chrysalis is a three-day spiritual renewal retreat for high school students who are at least 15 years old through their senior year that provides an opportunity to learn more about faith, to experience Christian love and support, and a chance to make new commitments in their faith journey.

Do Not Complete – Official Use Only			
Rec'd Date:	DATE RECEIVED		
Cash/Check #		Amount	
Acceptance Letter		W.L. Letter	
Parent Letter		Sponsor Letter	

Upcoming	SPRING	Mar 4-6, 2011	FALL	Nov 5-7, 2010	Today's Date	TODAY'S DATE
Weekends:		Mar 9-11, 2012		Nov 4-6, 2011		

Name:		Sex	<input type="checkbox"/> M <input type="checkbox"/> F	Email:	
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Name desired on name tag		Home Phone		Cell Phone	
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Address		City		State		Zip code	
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Birthdate		School		Grade	
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In what school organizations are you active?					
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If you work, where do you work?		What do you do?			
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Name and Denomination of church now attending					
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Pastor or Youth Director's Name					
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In what church/religious organizations are you active?					
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Has Chrysalis been explained to you?					
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Has the program of group reunion and follow-up meetings been explained to you?					
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Are you on a special diet?		If so what?			
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Are you on medication?		If so what?			
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Do you have a health problem or physical handicap that may affect your attendance at Chrysalis?					
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If yes, please specify					
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State briefly why you wish to be involved in the Chrysalis Community and what you expect from it					
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I agree to abide by the rules and directions of the Chrysalis Leadership Team on this weekend. (Youth, please sign in box to right)	YOUTH SIGNATURE HERE				
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Parental Consent I am the parent or legal guardian of this participant, and hereby grant my permission for him/her to participate fully in said activity, and hereby give my permission for the Chrysalis staff to authorize medical treatment, including but not limited to emergency surgery or medical treatment, and assume the responsibility of all medical bills, if any, and do also hereby give permission for my child to ride in any vehicle designated by the Chrysalis staff while attending and participating in the aforementioned activities. **(Please list any allergies or pertinent medical information on separate sheet)** I also [and on behalf of my child-participant if under the age of 21 years] hereby assume all risk of personal injury, sickness, death, damage and expense as a result of participation in recreation and activities involved therein, and agree to hold harmless EVANSVILLE AREA CHRYSALIS and the directors thereof from any and all liability.

Parent Signature	PARENT SIGNATURE HERE	Date	
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Parent's Name(s)	PLEASE PRINT NAME	Email Address	
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Parent's Address			
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Total cost is \$60.00. Please enclose a registration deposit of \$10.00, which is not refundable unless there are no openings. The \$60 applies toward the cost of lodging, food and supplies; however, it does not cover the total cost. The cost of the 72-hour experience is dependent upon additional contributions made by persons interested in youth having this experience. Checks should be made payable to Evansville Area Chrysalis and forwarded with the application to the Sponsor for them to complete their portion.

****This application will not be complete or processed if it does not include the \$10 deposit****

SPONSOR'S APPLICATION FOR EVANSVILLE AREA



Email Contact:
registrar@evansvillechrysalis.com
Website:
<http://www.evansvillechrysalis.com>

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HIGH SCHOOL

To Candidate: Give this form to someone from the Chrysalis, Emmaus, Tres Dias or other three day community who knows you.

Candidate's Name	PLEASE PRINT NAME		Today's Date	
Type of Weekend				
Date of the Weekend				
Why do you think this candidate should make Chrysalis?				
How long have you known the candidate and in what capacity?				
How would you describe the candidate? (Leader, Follower, Quiet, Outgoing, etc.)				
<i>(Please furnish any additional comments you feel important on an attached sheet)</i>				
Sponsoring someone for Chrysalis must be viewed as a total commitment, not just a gesture of friendship. Sponsorship means that you commit to helping someone become more of a leader for Christ through the Chrysalis experience and afterwards in his or her local church. If you are not willing to make this commitment, you should not sponsor. Because of the required commitment, you are allowed to sponsor <u>only one candidate</u> per weekend. If you send in more than one as sponsor, the additional applicants after your first one will be placed at the end of the waiting list				
As a sponsor, I commit to the following:				
<input type="checkbox"/>	I recognize that Chrysalis is not for everyone. Chrysalis is meant to strengthen an already existent relationship with Christ.			
<input type="checkbox"/>	I have honestly looked at my reasons for sponsoring this candidate.			
<input type="checkbox"/>	I know this person, not just know about them			
<input type="checkbox"/>	I have prayed about it and believe this is the right-time for this person to experience Chrysalis			
<input type="checkbox"/>	I am willing to make a significant commitment to my candidate, both during and after the weekend.			
Specifically, what support will you provide the candidate " during " the Chrysalis weekend?				
Specifically, what support will you provide the candidate " after " the Chrysalis weekend?				
Does this candidate need help financially?	<input type="checkbox"/> Yes <input type="checkbox"/> No		Will his/her church help financially?	
Sponsor's Name	PLEASE PRINT NAME		Email Address	
Address			City	
State		Zip code		
Your Church			Phone Number	
Where and when did you make Chrysalis, Emmaus, Tres Dias, Cursillo, etc.?				
SPONSOR'S SIGNATURE				
Please return this form to the Registrar at the address listed in the header <u>no later than one week before the weekend</u>				
Note to Sponsor Please obtain the nonrefundable pre-registration deposit of \$10.00 from your candidate. Remind them that the balance of \$50.00 is due the day of registration. Please help them find financial help if necessary, or indicate the need on this form.				