



Prairie Sunshine Via de Cristo
520 Nazarene Rd.
Jacksonville, IL. 62650

Candidate Application

____/____/200__

**PLEASE TYPE OR PRINT CLEARLY
PLEASE FILL OUT ALL INFORMATION COMPLETELY**

Mr.
Mrs.
Miss

(FIRST NAME)	(LAST NAME)	(NAME ON TAG)	(SPOUSE NAME)
(STREET ADDRESS)	(CITY)	(ST.)	(ZIP)
(OCCUPATION)	(BIRTHDATE)	(CHILDRENS AGES)	
SINGLE	<input type="checkbox"/>		
		(HOME PHONE)	(CHURCH ATTENDING)
		(WORK PHONE)	(DATE JOINED)
MARRIED	<input type="checkbox"/>		
		(PREVIOUS CHURCH IF LESS THAN ONE YEAR)	(DATE JOINED)
DIVORCED	<input type="checkbox"/>		
		(WHERE DID HUSBAND ATTEND WEEKEND)	(WEEKEND #)
WIDOWED	<input type="checkbox"/>		

Please list any offices held in a church or civic organization

Education

High School _____ (# Yrs.) College _____ (# Yrs.) Degrees? _____

Emergency Contact Information

(NAME)	(RELATIONSHIP)	(PHONE #)	(PHONE #)
(NAME)	(RELATIONSHIP)	(PHONE #)	(PHONE #)

Please note any medical or dietary attention you may require during Via de Cristo*

*Via de Cristo is an intense three-day religious experience that utilizes modern group techniques designed to bring believers into a renewed relationship with Christ, fellow Christians and the church. This weekend can be physically and emotionally tiring. If you have any physical or emotional problem which you previously or are currently receiving treatment, the Via de Cristo experience may not be for you at this time. Please consider this carefully before submitting your application and advise your sponsor as soon as possible if you have any doubts.

The suggested donation for the weekend is \$100.00, payable to **Prairie Sunshine Via de Cristo**
(If finances are a problem, please talk to your sponsor, as scholarships are available)
APPLICATIONS WILL NOT BE PROCESSED WITHOUT ALL THREE FOLLOWING SIGNATURES.

Candidate (Signature) _____ / ____ / 200__

Sponsor (Signature) _____ / ____ / 200__

Pastor (Signature) _____ / ____ / 200__

Church / Office Phone # _____

SPONSOR INFORMATION

PLEASE MAIL THIS APPLICATION TO:

**Prairie Sonshine Via de Cristo of Central Illinois
C/O Church of the New Covenant
520 Nazarene Rd.
Jacksonville, IL. 62650**

Applications are accepted on a "first received, first processed basis". Priority is given to all clergy and wives of husbands who completed the previous weekend.

Completed applications can be expedited by faxing them to: (217) 243-2854
Attention: Valisha Zimmer, Pre-Weekend coordinator.
All faxed applications MUST be mailed as well.

_____ (FIRST NAME)	_____ (LAST NAME)	_____ (WEEKEND ATTENDED)
_____ (SPOUSE NAME)		_____ (WEEKEND ATTENDED)
_____ (STREET ADDRESS)	_____ (CITY)	_____ (ST.)
		_____ (ZIP)
_____ (HOME PHONE)	_____ (CHURCH ATTENDING)	Weekend cost: \$100.00
		Paid by Sponsor <input type="checkbox"/>
		Paid by Candidate <input type="checkbox"/>
		Other arrangements <input type="checkbox"/>
_____ (WORK PHONE)	_____ (NAME OF REUNION GROUP)	Received check # _____
_____ (E-MAIL ADDRESS)	_____ (WHERE DOES YOUR GROUP MEET)	Date received ____/____/____