

Little Egypt Chrysalis Application – Applicant Page

Flight Number: _____

Weekend Dates: _____

Applicant Information

Age group: Youth – ages 15-18 or high school Young Adult – ages 18-24 or post-high school

First Name: _____ Last Name: _____ MI: _____ Gender: M / F

Name for T-Shirt: _____
Name tag: _____ Birthday: _____ Age: _____ Size: _____

Address: _____ City: _____ State: _____ Zip: _____

Applicant Email: _____ Applicant Cell Phone: _____ Text? Y / N

Parent / Guardian Name: _____ Relation: _____
Parent / Guardian Email: _____ Parent / Guardian Cell Phone: _____ Text? Y / N

Favorite Activities: _____ School Currently Attending: _____
Explain Current / Completed
Why: _____ School Year: _____

Has the Chrysalis weekend been explained to you and your parents / guardians? Y / N

Have Chrysalis Hoots been explained to you and your parents / guardians? Y / N

Why do you wish to participate in the Chrysalis Flight? What do you expect to receive from Chrysalis?

Applicant Signature: _____ Date: _____

Release Statement / Medical Information

List all allergies, medications being taken, medical problems, special diets, or other information: _____

Emergency Contact: _____ Relation: _____ Phone: _____

Over the course of the Chrysalis Weekend, group pictures will be taken at times. By signing this application, you acknowledge that pictures may be published by the Little Egypt Chrysalis community for the purpose of its ministry.

The applicant, _____, has my permission to participate in all activities – including required transportation – during the Chrysalis Weekend. In the event of an emergency if I cannot be reached by phone, the Chrysalis staff has my permission to provide the medical care necessary for my child's well-being. I also give permission to the Chrysalis staff to administer necessary prescription and non-prescription medication. I release and discharge Chrysalis, its board, agents, and members from any and all liability from illness, injuries, and damages that may arise out of or resulting from my child's participation in or traveling to or from this event.

Parent / Guardian Signature: _____ Date: _____

Pastoral Information

Name and Denomination Of Church: _____ Location: _____

Position And Name: _____ Email: _____

Pastor's / Church Leader's Phone: _____ How long have you known the applicant and in what capacity? _____

Church or Community Activities: _____

Do you recommend the applicant for Chrysalis? Y / N Explain: _____

Pastor's / Church Leader's Signature: _____ Date: _____

Little Egypt Chrysalis Application – Sponsor Page

Sponsor Information

First Name: _____ Last Name: _____ MI: _____ Gender: M / F
Address: _____ City: _____ State: _____ Zip: _____
Sponsor Sponsor
Cell Phone: _____ Email: _____
Name and Denomination of Church: _____ Location: _____
Community Name and Number of your Chrysalis Flight or Emmaus Walk: _____
Are you in a Reunion Group? Y / N If yes, name and location of your Reunion Group: _____

Sponsor Responsibilities

How long have you known the applicant and in what capacity? _____ Why do you believe the applicant is ready for Chrysalis? _____
Have you fully explained Chrysalis to your applicant and his / her parents or guardians? Y / N
Will you assist your applicant in establishing a Reunion Group? Y / N
Will you pray and sacrifice for your applicant? Y / N
Will you bring or arrange transportation to the Chrysalis Weekend for your applicant? Y / N
Will you attend Sponsor's Hour, Candlelight, and Closing? Y / N
Are you aware that your applicant is not to receive any special gifts during the Chrysalis Weekend? Y / N
Have you warned your applicant that he/she is not allowed to use a phone, camera, iPod, etc. during the weekend? Y / N
If your answer is no to any of the above questions, will you arrange for someone to fulfill your responsibilities? Y / N
Is your applicant aware of the book and CD table on the third day and that he / she will need money for it? Y / N
Have the parents / guardians of your applicant participated in Emmaus or Chrysalis? Y / N
Does your applicant have the physical and mental health needed to attend the Chrysalis Weekend? Y / N
Is your applicant under temporary emotional strain which might indicate that participation should be postponed? Y / N
Are there any additional circumstances concerning your applicant of which the Chrysalis team should be aware? Y / N
If yes to the final two questions, please explain: _____

Special Needs of Applicant

Please remember that the Chrysalis Weekend is an intense program of Christian study and spiritual growth. Chrysalis is NOT a weekend retreat or cure-all. It is preferred for your applicant to be active in a church and to desire an opportunity to grow in Christ and enhance his/her participation in a church. If you have any questions regarding your applicant or the weekend, please contact the Little Egypt Chrysalis Board of Directors. You may also visit our website at www.littleegyptchrysalis or our social media pages listed below.

Sponsor's Signature: _____ Date: _____

Application Payment

Please enclose the \$100 payment to offset the expenses for the Chrysalis Weekend. Please make checks payable to LITTLE EGYPT CHRYSALIS or LECC. If you are unable to pay your applicant's fee, scholarship funds are available upon request from the Little Egypt Chrysalis Board of Directors, but it is asked that you sacrifice as much as you are able to pay. You will be notified of your applicant's acceptance and the date, time, and location of the weekend. Please notify the Little Egypt Chrysalis Board of Directors if your applicant is unable to attend. Both pages of this application must be completed for acceptance on a Chrysalis Weekend. The Sponsor must be a former attendant of an Emmaus Walk or Chrysalis Flight.
Are scholarship funds needed? Y / N If yes, please indicate how much money is needed: _____

Submit Application

Applications may be delivered to any member of the LECC Board of Directors or through the contact information below.

Contact LECC

Phone: 618-771-0190

Fax: 618-658-2791

Email: ChrysalisLE@gmail.com

Connect with LECC

Facebook: Little Egypt Emmaus & Chrysalis

Twitter: @Chrysalis_LE

Website: ChrysalisLE.weebly.com

Mail LECC

Little Egypt Chrysalis

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