



**VIA de CRISTO of  
WESTERN WASHINGTON**  
 c/o Resurrection Lutheran Church  
 134 South 206<sup>th</sup> Street  
 Des Moines, WA 98198  
  
 (206) 824-2978  
<http://www.vdcww.org>

**APPLICATION TO ATTEND A WEEKEND**

**IT IS IMPORTANT TO REALIZE THAT A *VIA DE CRISTO* WEEKEND IS DESIGNED FOR BAPTIZED CHRISTIANS, 21 YEARS OF AGE OR OLDER, WHO ARE PHYSICALLY ABLE AND EMOTIONALLY STABLE.**

**SECTION I. APPLICANT INFORMATION**

(Please fill in Section I completely, have your pastor fill in Section II sign and return all to your sponsor.)

Name \_\_\_\_\_ Birth date \_\_\_\_\_ Sex \_\_\_\_\_ Phone \_\_\_\_\_

Name you prefer to be called \_\_\_\_\_ Spouse's name \_\_\_\_\_

Address \_\_\_\_\_

E-mail address \_\_\_\_\_

Church you attend & denomination \_\_\_\_\_

Church address \_\_\_\_\_

Your pastor's name \_\_\_\_\_

Weekends are held in the Spring and Fall of each year. Please indicate which you can attend.

Spring       Fall       Either

**YES      NO**

      Has the *Via de Cristo* been explained to you?  
       Do you have any special dietary requirements? (Please explain)

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

      Do you require medications at a specific time each day? (Please explain)

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

Do you have any health/physical restrictions requiring special equipment /facilities? Special sleeping needs? (Please explain)

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If you are married, has your spouse attended a *Via de Cristo* weekend? If yes, when and where? If not, when does your spouse plan to attend?

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Please explain why you have chosen to attend a *Via de Cristo* weekend.

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Emergency Contact:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

**Applicant's Signature**

**Date** \_\_\_\_\_



**SECTION III. SPONSOR INFORMATION**

**Notes to sponsors:**

- Please ensure that both your applicant and your applicant's pastor have filled out the appropriate pages of this application.
- The cost for an applicant to participate in a weekend is \$100. If it is not possible to contribute that amount, be assured no one will be turned down who cannot contribute financially.
- Sponsoring a pilgrim is both a joy and a responsibility. Remember: the *Via de Cristo* is not structured to solve a person's deep-seated personal problems. It is designed to provide to those attending a deeper understanding of what it means to be a disciple of Jesus Christ. This weekend is intended for baptized Christians, 21 years of age or older. Please, select your applicants with these thoughts in mind.

Sponsor's Name \_\_\_\_\_ Applicant's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (H) \_\_\_\_\_ Phone (W) \_\_\_\_\_ E-mail address \_\_\_\_\_

Church you attend & denomination \_\_\_\_\_

Why are you sponsoring this person for a *Via de Cristo* weekend?

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

How long have you known this person? \_\_\_\_\_

**YES      NO**

- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Are you now in a Group Reunion?  |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you served as a sponsor before?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Are you willing to pray and do palanca for your participant?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Will you obtain personal palanca letters for your participant?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Will you care for the special needs of your participant's family during the weekend?                             |
| <input type="checkbox"/> | <input type="checkbox"/> | Will you attend the Sunday Closing?  |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you understand the responsibility in assisting your participant in finding a Reunion Group?                   |
| <input type="checkbox"/> | <input type="checkbox"/> | Will you accompany your participant to their first Ultreya?  |
| <input type="checkbox"/> | <input type="checkbox"/> | Is your participant aware that, except in an emergency, there will be no contact with family during the weekend? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you receive a <i>Via de Cristo</i> newsletter?  |

Sponsor's Signature \_\_\_\_\_ Date \_\_\_\_\_

**RETURN COMPLETED FORM TO:**

**Jackie Kinunen  
Pre-Weekend Coordinator  
Via De Cristo of Western Washington  
c/o King of Kings Lutheran Church  
18207 108<sup>th</sup> Avenue SE  
Renton, WA 98055**

**253-630-9396  
[jrkinunen@comcast.net](mailto:jrkinunen@comcast.net)**