



Journey in Faith

Via de Cristo

Weekend Registration



PARTICIPANT INFORMATION (please print) Weekend: Co-ed _____

Name _____ Nickname _____ Address _____

Phone # _____ Email _____ Birth Date _____ Occupation _____

Spouse's Name: _____ Number of Children: _____

Has your spouse made a *Via de Cristo* weekend? _____ If so, when and where: _____

Home Congregation _____ Denomination _____

Leadership positions held in church _____

Please indicate any medical, dietary or physical limitations you may have: _____

Pastor's Signature: _____ I offer my support and prayers for my parishioner's participation in this opportunity for spiritual growth.

Participant's Signature: _____ Date: _____

A typical weekend begins on Thursday evening and closes late Sunday afternoon. Attendance for the entire weekend is expected. A team of clergy and lay people present a program based on the topics of grace, Christian living and the church. There are numerous opportunities for discussion, reflection, prayer, sharing, spiritual counseling, communion, singing and fellowship. These weekends, the *Via de Cristo* (way of Christ), are for all adult Christians that have an active desire to deepen their faith, knowledge, discipleship and love of Christ. For more information you can visit JIF's web page at journeyinfaith.org and Camp Innabah innabah.org which is the location of the weekend.

SPONSOR INFORMATION Name _____ Weekend Attended _____

Address _____ Phone _____ Email _____

Sponsor, please forward the completed registration to the JIF Sponsorship Coordinator

Please initial the space if you **DO NOT** wish to have your picture placed on JIF's Facebook page. _____

Please share your T-shirt size _____

Journey in Faith, VdC

EMERGENCY FAMILY INFORMATION:

Your Name: _____

Please list the names & contact information of your spouse, children, parents, etc.

Name: _____

Relationship: _____

Address: _____

City, State, zip: _____

Phone: _____

Name: _____

Relationship: _____

Address: _____

City, State, zip: _____

Phone: _____

Name: _____

Relationship: _____

Address: _____

City, State, zip: _____

Phone: _____

Name: _____

Relationship: _____

Address: _____

City, State, zip: _____

Phone: _____

Name: _____

Relationship: _____

Address: _____

City, State, zip: _____

Phone: _____