



Team Application Form 2015

PERSONAL DETAILS			
Name		Age	
Postal Address		Code	
Telephone (Home)		Telephone (Work)	
Cell phone Number			
e-mail Address			
Will you accept communication from the Chrysalis/Emmaus Board via e-mail			Yes/No

CHRYSLIS, JOURNEY AND EMMAUS DETAILS	
When did you attend YOUR Chrysalis/Emmaus weekend?	(dd/mm/yyyy) Walk/Journey/Flight #
Tick the appropriate box: Chrysalis <input type="checkbox"/> Journey <input type="checkbox"/> Emmaus <input type="checkbox"/>	
Community	
Reunion Group	
Do you participate in Next Steps/Fourth Day activities <i>(i.e. Support Candlelight, take part in prayer vigils, etc)</i>	Yes/No

HISTORY OF SERVING ON CHRYSLIS AND EMMAUS			
Capacity Served (specify the number of times served in each position)			
Spiritual Director		Assistant Spiritual Director	
Lay Director		Assistant Lay Director	
Adult/Table Leader		Youth/Assistant Table Leader	
Support Co-ordinator		Support Servant	
Prayer Co-ordinator		Prayer Support	
Music Co-ordinator		Music Team	
Board Rep		Photographer	
Flowers			

APPLICATION TO SERVE IN 2015 – CLOSING DATE FOR APPLICATIONS IS 24th October 2014			
Boys' Flight # 40 2 nd - 5 th July 2015		Girls' Flight # 41 2 nd - 5 th July 2015	
Preference of Serving (<i>number in preference</i>)			
Adult/Table Leader		Youth/Assistant Table Leader	
Prayer Support		Support Servant	
Clowning		Formal Dinner (Saturday Late Afternoon)	
Flowers		Entertainment	
Photographer (Friday Morning)			
Music Team		Instruments/Vocal	
		List Instruments	
		Sound and Data Projector	

Declaration by person applying to serve on a Chrysalis Team:

I, the undersigned, declare that:

- ❖ I will accept and be obedient to the authority and discipline under which I serve
- ❖ I am not aware of any spiritual or moral issue in my life that will prevent me from being a faithful witness of Jesus Christ while serving on Chrysalis.
- ❖ I am able to attend all training meetings and pay my fees in full before the flight commences.
- ❖ I will attend the training day and training weekend and will be there for the entire weekend of the Flight.

Name: _____

Date: _____

Signature: _____



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Applicant's Name: _____

TO BE SIGNED BY APPLICANT'S MINISTER		
Minister's Name		
Church		
Phone	Home ()	Office ()

I support this application for this member of my congregation to serve on a Chrysalis team in the capacity as requested.

Signed

For any queries phone the Community Lay Director: *Greg Conolly* - 082 324 2504; cld.kzndrak@gmail.com
Or the Community Spiritual Director: *Andre du Plooy* - 082 319 1097; csd.kzndrak@gmail.com

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The weekend training for both flights will take place at Dawn view. A Community Gathering will be on the weekend of the **1 August 2015**.
Please commit to attending this too.

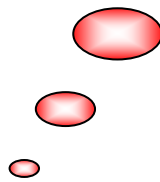
Training Day / Weekend	Date
1	8th - 10th May from 18:00
2	20th June 8:30 - 16:00



Please return completed form to: Greg Conolly

Fax: 086 763 2806
E-mail: cld.kzndrak@gmail.com

Queries: Greg Conolly
082 324 2504



Banking Details	
Should you wish to deposit directly to our account, please fax the deposit slip or proof of EFT to 086 672 9784 and clearly reference with your name and 'team fees'.	
Bank:	ABSA
Account Name:	KZN Drak Chrysalis
Account Number:	4057721796
Branch Name:	Musgrave
Please use your name as a reference	