

# TEXAS GULF COAST VIA DE CRISTO PILGRIM CANDIDATE REGISTRATION FORM

WEEKEND #: 8

DATE: Feb. 1-4, 2024

LOCATION: Camp Lone Star Pines

22610 Tuwa Rd., Tomball, Tx 77375

979-968-1657

(PLEASE PRINT CLEARLY)

NAME: \_\_\_\_\_ Preferred Name for Nametag: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE: (HOME) \_\_\_\_\_ (CELL) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

Gender: \_\_\_\_\_ Age: \_\_\_\_\_ Check one: Single  Married  Widow/Widower

Check one: Lay Person  Clergy  SAM  Lay Minister

HOME CONGREGATION (NAME AND CITY): \_\_\_\_\_

MEDICAL, DIETARY OR SPECIAL NEEDS: \_\_\_\_\_

EMERGENCY CONTACTS: (Persons who are NOT attending the Via de Cristo Weekend)

(Primary): Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Other Phone # \_\_\_\_\_

E-Mail \_\_\_\_\_

(Alternate): Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Other Phone # \_\_\_\_\_

E-Mail \_\_\_\_\_

REGISTRATION FEE: \$240

The ENTIRE PAYMENT IS DUE to Debbie Winkelmann, Treasurer, by January 13, 2024.

THREE METHODS OF PAYMENT are available:

CHECK \_\_\_ PAYPAL \_\_\_ ZELLE \_\_\_ (Please check the one you are using.)

Make CHECKS payable to: "TGCVDC" and mail your check with this registration form to:

Debbie Winkelmann 8819 Wind Side Dr., Houston, TX 77040

If using PAY PAL or ZELLE, make your payment to TGCVDC through [Txgulfcoastviadecristo@gmail.com](mailto:Txgulfcoastviadecristo@gmail.com). Scan and email this registration form to Debbie Winkelmann at [debbiewink@sbcglobal.net](mailto:debbiewink@sbcglobal.net), or mail it to her

(address above).

(For Registrar Use: Paid Amt. \$ \_\_\_\_\_ Check # \_\_\_\_\_ Date of Check: \_\_\_\_\_ OR PayPal \_\_\_ or Zelle \_\_\_)

**TO BE COMPLETED BY THE PILGRIM PARTICIPANT:**

My reason for attending the Via de Cristo Weekend: \_\_\_\_\_  
\_\_\_\_\_

**PARTICIPANT’S COVENANT:** As a participant in the Via de Cristo Weekend, I will:

- Complete this Pilgrim Application and pay all financial obligations before the start of the weekend.
- Abide by the Camp’s drug, alcohol and tobacco free policy.
- Abide by the rules of the State of Texas (current as of Sept. 1, 2023) concerning COVID-19 Health and Safety Guidelines and Recommendations for indoor and outdoor gathering.

In addition:

- I understand that photographs may be taken during the VDC weekend which may be used on a website, multimedia or promotional media existing now or in the future. **I DO / I DO NOT (circle one)** grant permission to TGCVDC to create, copy, reproduce, exhibit, publish or distribute my image.
- I understand that upon the completion of the Weekend, my name, address, phone number, email and home church will be entered into the membership/email roster of TGCVDC for VDC use only, and will only be accessible to other TGCVDC members.

My signature indicates my agreement to the above Covenant.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**TO BE COMPLETED BY A MEMBER OF THE CLERGY:** This candidate meets the Texas Gulf Coast Via de Cristo guidelines for attendance at a Weekend and may become a part of a local Via de Cristo or other Cursillo Community. (See “Guidelines for Candidate” on attached page.)

Print Name of Clergy: \_\_\_\_\_

Signature of Clergy: \_\_\_\_\_

Name of Church: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Date: \_\_\_\_\_

**TO BE COMPLETED BY THE SPONSOR:** I will prepare this applicant for the 3-day weekend and help the applicant to continue to grow in faith after the weekend. I have read the Guidelines of a Sponsor (on attached page) and promise to carry out these responsibilities of a Sponsor.

Print Name of Sponsor: \_\_\_\_\_

Signature of Sponsor: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (C) \_\_\_\_\_

Email : \_\_\_\_\_

Name of Church: \_\_\_\_\_

Date: \_\_\_\_\_