Northern Lights Emmaus Community Willing Servant Form

Name:		Church:	
Address:		Home Phone:	
		Work Phone: _	
E-mail:		Cell Phone:	
Your Walk:	Number: Date:	Walk Community:	
Share Group I	am attending:		
_	Previous Live-in	Team Experience ((if any)
Date & Walk #	Community	Position(eg. Table Lead, Kitchen)	Talk Given (if applicable)
	(continue	e on back, if needed)	
	Live-i	n Team Interest	
	n members normally serve as check all areas in which you		ilities, Music, or in the Prayer
Kitchen Ag		gape/Facilities	Prayer
Asst. Table Leader Ta		ble Leader	Asst. Lay Director
Music Team: Voice:SopranoAltoTenorBass			
Instruments:Guitar KeyboardOther			
Asst. S ₁	piritual Director (clergy only))	
I'm available to work Spring Fall I'm not available to work at this time			
	Walk-in	Support/Interest	
Pre-Wa			After-Walk clean up
Kitcher	Facilities	Prayer Vigil	Food Agape
What other ski	ills or areas of service might y	you be willing to offe	er the community?
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Please return t	•	naus – Aun: Into Mg Hamilton, OH 4501	Data