



PORT ELIZABETH

CHRYSALIS

P.E. Emmaus/Chrysalis Community - Team Application form to serve on a Chrysalis Flight

Please complete this form and address to:
The Chrysalis Registrar - fax to: 086 688 0872
or email to: registrar@pe-emmaus.co.za

Name: _____

Address: _____ Post code _____

Email: _____ Cell: _____

Phone: (h) _____ (w) _____

I did Flight/Walk number _____ in _____ Community

How **many times have you served** before on a Chrysalis / Emmaus Team? Please **rank your preference** for serving in the following capacity (1 : highest)

<input type="checkbox"/>	Spiritual Director	Happy to serve where needed	<input type="checkbox"/>
<input type="checkbox"/>	Lay Director	Spiritual Director	<input type="checkbox"/>
<input type="checkbox"/>	Assistant Lay Director	Assistant Lay Director	<input type="checkbox"/>
<input type="checkbox"/>	Support Team Leader	Support Team Leader	<input type="checkbox"/>
<input type="checkbox"/>	Support Team Computer	Support Team Computer	<input type="checkbox"/>
<input type="checkbox"/>	Support Team Member	Support Team Member	<input type="checkbox"/>
<input type="checkbox"/>	Prayer Team Leader	Prayer Team Leader	<input type="checkbox"/>
<input type="checkbox"/>	Prayer Team Member	Prayer Team Member	<input type="checkbox"/>
<input type="checkbox"/>	Table Leader	Table Leader	<input type="checkbox"/>
<input type="checkbox"/>	Youth / Assistant Table Leader	Youth Table Leader	<input type="checkbox"/>
<input type="checkbox"/>	Music Team Leader	Music Team Leader	<input type="checkbox"/>
<input type="checkbox"/>	Muso	Muso	<input type="checkbox"/>
<input type="checkbox"/>	AV Operator	AV Operator	<input type="checkbox"/>
<input type="checkbox"/>	Flowers	Flowers	<input type="checkbox"/>
<input type="checkbox"/>	Entertainment	Entertainment	<input type="checkbox"/>
<input type="checkbox"/>	Photographer	Photographer	<input type="checkbox"/>
<input type="checkbox"/>	Clowning	Clowning	<input type="checkbox"/>

Any info regarding your choices above? _____

Please indicate on **which Flight** you would like to serve: ___ **Either** #11 or #12

___ **Boys** Flight #11 (21 to 23 Jun 2019) ___ **Girls** Flight #12 (21 to 23 Jun 2019)

Do you have any special dietary requirements for medical reasons:

I am **not available** to work on the Flights, but would like to make a financial contribution towards sponsoring a Caterpillar/Team member R _____

The compulsory **team formation** for both Flights will be:

First Team Formation – Sat 25th and Sun 26th May 2019

Second Team Formation – Sat 1st June 2019

Venue: Westering Methodist Church

Training times (approx) 07h30 – 18h00 (Saturday)
07h30 – 12h30 (Sunday)

The team costs for each Flight are:

Team Fees (inclusive of training) – R900

(We appeal to all team members to make payment in full by the end of the second training weekend)

Team fees can be deposited into:

Bank: Standard Bank

Account name: P E Emmaus

Account Number: 383 707 145

Branch Code: 05 04 17

Reference: Your First name, Surname, Team, Flight No
(eg Jane Smith Team 9)

(Your correct reference is essential as it is the only means by which we can balance the books)

A bank deposit/electronic transfer is the most convenient payment for Chrysalis!! If paying by cheque, make payable to P.E. Emmaus

Please fax the proof of payment to 086 688 0872 or email to treasurer@pe-emmaus.co.za

For further information about Chrysalis, contact:

Community Spiritual Director:

Ronnie Allwright

Cell: 083 280 6038

Email: csd@pe-emmaus.co.za

Community Lay Director:

Lianne Kritzinger

Email: cld@pe-emmaus.co.za

Cell: 083 250 3536