



Heartland of Texas Emmaus Community
Walk to Emmaus Scholarship Application

Name: _____ **Date:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Date/Location of Emmaus Walk: _____

Application is for a Full Scholarship (Registration Fee minus \$25)=\$ _____
For Full Scholarship, the Sponsor or the Pilgrim must pay \$25.

Application is for 1/2 Scholarship (Registration Fee Divided by 2)=\$ _____

The reason the scholarship is needed: _____

Signature of Applicant

**Signature of Sponsor
(when applicable)**

Approved by: (Scholarship Committee)

Date: _____