



**Pilgrim Application to Attend a Lutheran Via de Cristo of the Rockies Weekend**

**APPLICANT INFORMATION**

Pilgrim Name			Home Phone		
Address			Work Phone		
City	State	Zip	Preferred First Name		
Email Address					
Church You Attend + Denomination				City, State	
Date of Birth / /	Gender	Marital Status	Special Diet or Food Allergies?		
Are you an ordained Clergy or Lay Pastor?			If 'Yes', Denomination:		
Has your spouse attended a Via de Cristo or similar weekend? Circle YES or NO. If YES, When:					
Do you have a health or medical condition and/or physical handicap/ limitation that we need to consider? If 'Yes', please specify:					
Please give a brief statement about why you would like to attend a Via de Cristo weekend, what you expect from it, and anything about yourself and your faith:					

I am a baptized Christian and attending a Lutheran church.

Signature/Date: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_

Pastor's Signature/Date: \_\_\_\_\_

*Please check for completeness and return this form to your sponsor.*

**Weekend No. and date for which this application is intended:**

**LVDCR Weekend No.:** \_\_\_\_\_ **LVDCR Weekend Date:** \_\_\_\_\_

If a pilgrim becomes unable to attend a weekend, their registration will be moved to the next weekend.

**Mail to:** **Cathy Guman, Registrar**  
**LVdCR**  
**731 N. Weber St., Suite 10**  
**Colorado Springs, CO 80903-2918**      email: [CCGuman@aol.com](mailto:CCGuman@aol.com) fax: (719) 633-4250

Guidelines may be obtained online at [www.LVDCR.org](http://www.LVDCR.org), or contact the Registrar at: (719) 633-9700 or the above address.