TO BE COMPLETED <u>FULLY</u> BY THE CANDIDATE AND RETURNED TO THE <u>SPONSOR</u>

Candidate Name			
Address			
City	State		Zip Code
Home Phone	Cell Phone	Date of Birth	Grade
Email address			
	ag		Sex (Male / Female)
Name & Denomination of	f church		
School presently attendi	ng		
Religious/Community Or	ganizations in which you are a	ctive, please list any leader	ship positions:
School Organizations in v	which you are active, please lis	t any leadership positions:	
Do you have special diet	ary allergies/restrictions? If so	, please list:	
-	es or physical/emotional handi o accommodate you as best w		
Please briefly state why	you wish attend/be involved in	n a KOINONIA Weekend:	

PLEASE RETURN THESE FORMS TO YOUR <u>SPONSOR</u> TO RETURN TO THE REGISTRAR.

TO BE FILLED OUT BY THE CANDIDATE AND RETURNED TO THE SPONSOR

I understand that I must remain on site the entire weekend, beginning from 9:00 am (Saturday in October / Friday in March) until about 3:00 pm (Monday in October / Sunday in March).

Sponsor	Printed Name:	
	Address:	
	Home phone:	
	Email address:	
Candidate		
	Signature:	
Parent/	Printed Name:	
Guardian	Signature:	

Requested information is *necessary* for proper registration for participation. Please fully complete all forms.

You will be notified of your acceptance and the dates and location of your weekend. It is **IMPORTANT** that you notify us **immediately** if you cannot come. There is usually a waiting list.

The cost of the weekend is \$60.00. You, your parent/guardian, your home church, or your sponsor, may enclose a check when returning this form to registrar or make payment at registration table on the first day of the weekend. Checks should be made payable to: Closer Walk of Upper New York. There *are* scholarships available (please contact the registrar) and the cost should <u>not</u> keep anyone from applying for participation. If you have the desire to attend, God will provide the means.

It is a very busy three days beginning at 9:00 am (Friday March/Saturday October) and ending about 3:00 pm (Sunday March/Monday October). Candidates must stay on site the entire weekend. **Therefore, persons of fragile health, or persons with serious emotional issues should not attempt a weekend.** Where health or other challenges do exist, it should be clearly stated on the application so that the team can be prepared. Also please be sure that your candidate is *willing* to attend.

All applications are **confidential** and are destroyed after the weekend.

Please return this form to: KOINONIA of UNY

C/O Melissa Watkins

P.O. Box 382

Freeville, NY13082

Please contact: 315-263-5223 or melissa watkins 1@hotmail.com with any questions.

PLEASE RETURN THESE FORMS TO YOUR SPONSOR TO RETURN TO THE REGISTRAR.

PASTORS/YOUTH LEADER REFERENCE FORM

TO BE FILLED OUT BY PASTOR OR YOUTH LEADER (Whomever knows the candidate best): Please return this form to the candidate's sponsor or to: Koinonia of UNY, C/O Melissa Watkins, P.O. Box 382, Freeville, NY 13082 (315-263-5223 or melissa watkins 1@hotmail.com.) Do **NOT return form to the candidate.

This form should be filled out **completely and thoroughly**. It will help us to place the candidate in a small group where he/she will benefit the most. The KOINONIA leadership will keep this information in STRICT CONFIDENCE, and all forms will be destroyed at the end of the weekend.

Candidate Name: Church:						
NOTE: KOINONIA I	S A RELIGIOUS	EXPERIENCE	FOR HIGH SCH	IOOL UPPER-CLA	SSMEN/WOMEN	
Please circle the appropria	te adjective and	d comment a	s necessary.			
Exercise of Leadership: Comments:	None	Poor	Good			
Maturity: Immature Comments:	_		Very Matu			
Area(s) of Leadership: Ch					· · · · · · · · · · · · · · · · · · ·	
Relationship to Peers: Comments:				mineering W	'ell-Liked	
How long have you known	the candidate?	'In	what capacity	?		
On a separate shee team understand a home life, personal	nd deal sympa	thetically wit	th the candida	te. Comments al	bout the candidate'	's
Pastor's Printed Name:				_ Phone:		
Address:						
Email address:						
Pastor's Signature:						

SPONSOR REFERENCE FORM

**TO BE FILLED OUT BY THE SPONSOR: Please return this form to: Koinonia of UNY, C/O Melissa Watkins, P.O. Box 382, Freeville, NY 13082. (315-263-5223 or melissa watkins 1@hotmail.com
This form should **NOT** be returned to the candidate.

This form should be filled out **completely and thoroughly**. It will help us to place the candidate in a small group where he/she will benefit the most. The KOINONIA leadership will keep this information in STRICT CONFIDENCE, and all forms will be destroyed at the end of the weekend.

Candidate Name:		Church:				
NOTE: KOINONIA IS A	RELIGIOUS EXPE	RIENCE FOR HIG	SH SCHOOL (UPPER-CLASS	SMEN/WOMEN	
Please circle the appropriate a	djective and com	ment as necessa	ary.			
Exercise of Leadership: N Comments:	one Po			xcellent		
Maturity: Immature A Comments:	-	iture Very				
Area(s) of Leadership: Churcl					· ·	Other
Relationship to Peers: Quie			Dominee	ring Well	l-Liked	
How long have you known the	candidate?					
On a separate sheet, pl team understand and a home life, personality,	leal sympathetic	cally with the ca	ndidate. Co	mments abo	ut the candidate	's
Sponsor's Printed Name:						
Address:Email address:						
Sponsor's Signature:						

Koinonia of Upper New York

Sponsor's Duties

- Pray for God's guidance for your candidate before inviting him/her to attend a weekend.
- Live the message of the Closer Walk/YAK/KOINONIA weekend/movement.
- Know your candidate well. He/she must have a certain amount of maturity and open-mindedness.
- Make sure your candidate is going because he/she wants to.
- Pray, considering whether God is calling you to pay your candidate's cost for the weekend (\$60.00). Often times the candidate's home church or the candidate's parents will be willing pay. Or each entity is able to work together to cover the cost. Checks should be made payable to: Closer Walk of Upper New York. There *are* scholarships available (please contact the registrar) and the cost should *not* keep anyone from applying for participation. If your candidate has the desire to attend, God will provide the means.
- Give your candidate their portion of the application to complete and *return to you*.
- Complete your portion and mail both of those to the registrar.
 - At the same time, give the pastor's portion of the application to the pastor (or youth leader if more familiar with the candidate) along with a *stamped envelope addressed to the registrar* for mailing by that person.
- <u>Transport your candidate to **and from** the weekend and the reunion and stay after dropping off your candidate for the Sponsor's Hour.</u>
- You are responsible to gather <u>agape notes</u> for your candidate from family, teachers, close friends, coaches, pastor, church family members, etc. and to explain to your candidate's parents/guardian about the <u>hoot and holy hour</u> and the importance that they *be* there.
- Support your candidate at the holy hour, with agape, and at the hoot and offer to bring/carpool with their family/parent(s)/guardian(s)/friend(s) to holy hour and the hoot.
- Take your candidate to the reunion & attend with them.
- Encourage your candidate to attend monthly happenings and, if feasible, provide or help to arrange transportation.
- Please, continue, after the weekend is over, to pray and influence them to grow in Christ and stay involved in their journey.
- Your obligation is not light pray for and guide your candidate.

It is a very busy three days beginning at 9:00 am (Saturday in October / Friday in March) and ending about 3:00 pm (Monday in October / Sunday in March).

Candidates must stay on site the entire weekend. Therefore, persons of fragile health, or persons with serious emotional problems should not attempt a weekend. Where health or other problems do exist, it should be *clearly stated* on the application so that the team can be prepared.

Also please be sure that your candidate is willing to attend. All Candidate paperwork is confidential and is destroyed after the weekend.

Thank You! Updated 06/2014