

# Mid-Michigan Chrysalis Registration

Flight begins on Thursday evening and ends on Sunday evening  
Location and dates of next Chrysalis Weekend are available on our website  
[www.midmichiganemmaus.com](http://www.midmichiganemmaus.com) (click on the Chrysalis link)

## To be filled out by applicant – Please print or type

Flight registering for:  Girl's  Boy's Have you applied to Chrysalis before:  Yes  No

Name: \_\_\_\_\_

Name requested on name tag: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone: ( \_\_\_\_ ) \_\_\_\_\_

School you attend: \_\_\_\_\_ Grade: \_\_\_\_\_

Do you work?  Yes  No If so, where (company name)? \_\_\_\_\_

Place of Worship (Place & Denomination): \_\_\_\_\_

Attend regularly?  Yes  No Pastor's Name: \_\_\_\_\_

Are you a member of this church?  Yes  No Have you been baptized?  Yes  No

List any religious (including youth group), school, and/or community organizations you are active in:

\_\_\_\_\_  
\_\_\_\_\_

Has Chrysalis been explained to you?  Yes  No

Has the follow-up program, gathering, and the post-flight meeting been explained?  Yes  No

Why do you want to participate in Chrysalis? What do you expect from Chrysalis? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sponsor's Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: ( \_\_\_\_ ) \_\_\_\_\_

1st Guardian's Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: ( \_\_\_\_ ) \_\_\_\_\_

2nd Guardian's Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: ( \_\_\_\_ ) \_\_\_\_\_

## **PLEDGE:**

I pledge that I will come to the Chrysalis weekend with a spirit of cooperation and that, at no time during the weekend, will I smoke, drink alcoholic beverages, or take any drugs other than those approved by my parent/guardian for medical purposes. I will also respect the mood of the weekend and agree to leave all cell phones and media devices at home in order to keep out all distractions from my journey.

Youth's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(If under the age of 18) *I acknowledge that my child has read and will adhere to the above pledge. Note: all information gathered will be kept confidential and only shared on an as needed basis with select team.*

All the information is necessary for your proper placement in a Chrysalis weekend. PLEASE MAKE SURE ALL BLANKS ARE FILLED IN ACCURATELY.

Your total cost for the weekend is \$55 if you register three weeks prior to the event, after that the cost will be \$70. A deposit of \$20 is required to reserve a spot for you and locks in your cost at \$55. The deposit is non-refundable, unless we have no openings for you. Checks should be made payable to: **Mid-Michigan Chrysalis.**

Please return this completed application, along with your parents completed application to your sponsor. You will be notified of your acceptance. If you have any questions or are unable to attend after registering, please contact the Registrar.

Cary Kessler  
111 W. Miller Rd.  
Midland, MI 48640

Phone: 989-835-7256  
E-mail: [toptamale@sbcglobal.net](mailto:toptamale@sbcglobal.net)

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**To be filled out by parent/guardian:**

\_\_\_\_\_ has my permission to attend Chrysalis. We understand that:

- Chrysalis is a religious experience for High School Sophomores, Juniors, and Seniors, and College Freshman.
- It is not designed to correct or counsel problem youth, but to encourage the spiritual growth and leadership of Christian youth with willing hearts.
- This weekend will be devoted to the teachings of Christianity and the development of young Christian leaders.
- Chrysalis is an Ecumenical program written by the Upper Room, a division of the United Methodist Church.
- If our son/daughter does not behave in a manner suitable to a Christian youth, we will be responsible for picking him/her up.
- I understand there is a \$55 cost for this weekend if my youth signs up three weeks prior to the event. After that the cost will be \$70.

In the event of an emergency and if I cannot be reached by phone, the Chrysalis Team has permission to secure the services of licensed medical professionals to provide the care necessary, including anesthesia, for my child's well being.

**Insurance Information:**

Please attach a copy of your medical insurance card, or fill out the following (if applicable):

Name of policyholder of health insurance that covers youth: \_\_\_\_\_

Name of Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Contract Number: \_\_\_\_\_

Effective date: \_\_\_\_\_

Please list any medical allergies, medications taken, medical problems, special diet, or other necessary information: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( \_\_\_\_ ) \_\_\_\_\_ alternate Phone: ( \_\_\_\_ ) \_\_\_\_\_

**If above cannot be reached, please call the following in an emergency:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: ( \_\_\_\_ ) \_\_\_\_\_

During the weekend, your child may need to be taken off the premise for shower purposes. I give permission for my child \_\_\_\_\_ to be driven by a certified driver in this circumstance.

Below and on a separate sheet of paper if necessary, **please furnish any additional comments** that you feel would help the team to understand and deal sympathetically with the candidate. Comments about the candidate's home life, personality, attitudes, difficulties, and hopes might be a help. Other persons (perhaps a pastor, youth counselor, or teacher) may make these comments on a separate sheet of paper if you think it would be helpful to the team.

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**Signature of parent/guardian:** \_\_\_\_\_ **Phone:** (\_\_\_\_) \_\_\_\_\_

# Mid-Michigan Chrysalis Registration

To be filled out by sponsor – Please print or type – **Please fill out all sections**

Candidate's Name: \_\_\_\_\_

Sponsor's Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (Home): (\_\_\_\_) \_\_\_\_\_ (Work): (\_\_\_\_) \_\_\_\_\_

Place of Worship (Name & Denomination): \_\_\_\_\_

Do you attend regularly?  Yes  No

Have you been on a Chrysalis, Emmaus, or other 3-day experience?  Yes  No

Date, time, and location your group meets? \_\_\_\_\_

Are you in a reunion, fourth day, or similar accountability group?  Yes  No

If no, reason? \_\_\_\_\_

How many candidates have you sponsored in the past year? \_\_\_\_\_

Do you feel this candidate exercises leadership?  Yes  No In what areas? (church, school, athletics, government, dramatics, music, clubs, etc.) \_\_\_\_\_

How does this candidate relate to others of the same age? (talkative, domineering, quiet, reserved, etc.) \_\_\_\_\_

Do you feel this youth is emotionally and spiritually ready to understand this experience?

Yes  No

How does this youth respond to new environments? \_\_\_\_\_

Below and on a separate sheet of paper if necessary, **please furnish any additional comments** that you feel would help the team to understand and deal sympathetically with the candidate. Comments about the candidate's home life, personality, attitudes, difficulties, and hopes might be a help. Other persons (perhaps a pastor, youth counselor, or teacher) may make these comments on a separate sheet of paper if you think it would be helpful to the team.

\*\*If comments are being made on a separate sheet of paper, please be sure that it is attached and identified with the author's complete name, address, phone number, and the candidate's name.

How long have you known the candidate? \_\_\_\_\_ In what capacity? \_\_\_\_\_

Have you met with the candidate's parents and explained that the Chrysalis Weekend is devoted to the teachings of Christianity and to the development of young Christian leaders and that it is an ecumenical program of the United Methodist Church?  Yes  No

Do you agree to bring the candidate to the weekend?  Yes  No

Attend sponsors hour?  Yes  No

Attend candlelight?  Yes  No

Attend the closing, invite the parents to do so, and take the candidate home if necessary?

Yes  No

Do you also agree to assist the candidate in finding and joining a reunion group and attending gatherings?  Yes  No

This form will help us to place the candidate in a group where they will benefit the most.

The Chrysalis directors will keep the information in strict confidence.

**Continue to pray for your candidate!!!**

As a sponsor, I understand and accept ALL my responsibilities and will prayerfully and sincerely work to comply with them prior to, during, and following the weekend.

**Sponsor's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Mail all completed registration forms (Youth, parent, and sponsor) and \$20 deposit (payable to: Mid-Michigan Chrysalis) to the Mid-Michigan Chrysalis Registrar.

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Midland, MI 48640

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**\*\*\*If your candidate is unable to attend after registering, please contact the registrar immediately\*\*\***