

South Georgia Chrysalis Flight
For Youth in Upper High School – Grades 10 - 12
Caterpillar Application

All of the information requested below is needed to ensure your proper placement on a Chrysalis weekend. Please fill in all of the information requested on the form and return the form to your sponsor.

You will be notified by letter of your acceptance for a Chrysalis weekend. Should you be unable to attend, please notify your sponsor or the registrar *immediately* so that your place may be filled by someone on the waiting list.

A non-refundable registration deposit of **\$50.00** is required to reserve your place on the waiting list. The deposit will be applied toward the \$100.00 registration fee for the weekend. This fee offsets some of the expenses of your Chrysalis weekend. Make your check payable to South Georgia Chrysalis.

For Use by Registrar Only

Date Received _____ **Deposit** _____ **Check #** _____

Name: _____ Age: _____ Birth Date: _____

Street Address: _____

City: _____ State: _____ ZIP: _____ Sex (Circle one): M F

Phone: _____ Name preferred for name tag: _____

Cell Phone: _____

E-Mail Address: _____ T-Shirt Size _____

Name of church you attend: _____ Denomination: _____

School you attend: _____ Current grade in school: _____

Church or community organizations: _____

School activities or organizations: _____

State briefly why you wish to attend a Chrysalis weekend: _____

Your sponsor's name: _____ Your pastor's name: _____

Special diet? _____ Allergies? _____

Any medical problems that require special attention? _____

Special medications? _____

Your Signature: _____ **Date:** _____

Signature of Recommending Pastor: _____ **Church** _____

SPONSOR, PARENT / GUARDIAN AND RECOMMENDING PASTOR MUST COMPLETE ALL INFORMATION AND SIGN THIS FORM.

South Georgia Chrysalis

Sponsor, Parent / Guardian and Pastor Approval

All of the information requested below is needed to ensure your applicant's proper placement on a Chrysalis weekend. Please fill in all of the information requested on the form and return it with a **\$50.00** deposit to:

South Georgia Chrysalis
P. O. Box 4751
Valdosta, GA 31604
www.southgeorgiachrysalis.com

You will be notified by letter of your applicant's acceptance for a Chrysalis weekend. Caterpillar applications cannot be accepted without Sponsor information and parent/guardian approval.

To Be Filled Out By SPONSOR

Name: _____

Street Address: _____ Apt. No. _____

City: _____ State: _____ ZIP: _____

E-mail Address: _____

Home Phone: _____ Work /CellPhone: _____

Name of church you attend: _____

Which Walk to Emmaus Chrysalis Cursillo Tres Dias did you attend? _____

Your Signature _____ Date _____

To Be Filled Out By PARENT / GUARDIAN

Name: _____ Relationship to applicant: _____

Street Address: _____ Apt. No. _____

City: _____ State: _____ ZIP: _____

Home Phone: _____ Work/Cell Phone: _____

If the above cannot be reached, call: _____ Phone: _____

_____ has my permission to attend the Chrysalis weekend at Camp Tygart. In the event of an emergency, and if I cannot be reached by phone, the Chrysalis staff has permission to secure the services of licensed medical professionals to provide any care necessary - including anesthesia - for my child's well being. Additionally, I have reviewed the information on the front of this application, and find it to be accurate.

Signature of Parent or Guardian _____ Date: _____