



# APPLICATION FOR VERMONT TRES DIAS

Tres Dias is a full three-day experience which utilizes modern group techniques to bring the candidate into renewed relationship with fellow Christians, the Church, and Christ. It can be physically and emotionally tiring. If you have physical infirmities or an emotional problem for which you are now having treatment, Tres Dias may not be for you. Please consider this carefully before filling out and submitting the application. Discuss this with your sponsor.

EXCEPT FOR NAME AND ADDRESS, ALL INFORMATION PROVIDED IS CONSIDERED CONFIDENTIAL. IT IS SOLICITED TO HELP PLAN THE WEEKEND ACTIVITIES. IF ADDITIONAL SPACE IS REQUIRED, PLEASE USE THE BACK OF THE SHEET.

**PLEASE PRINT.**

Today's Date \_\_\_\_\_

NAME \_\_\_\_\_  
(last) (first) (middle) (nickname? For Name tag)

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

YOUR AGE \_\_\_\_\_ MARITAL STATUS \_\_\_\_\_ NO. OF CHILDREN \_\_\_\_\_

If MARRIED, has spouse attended a Tres Dias or equivalent weekend?  Yes  No

If has not attended, has spouse submitted an application?  Yes  No

If attended, WHERE? \_\_\_\_\_ When? \_\_\_\_\_ Spouse's Name \_\_\_\_\_

Denominational Affiliation \_\_\_\_\_ Congregation Attending \_\_\_\_\_

Occupation \_\_\_\_\_ Highest education level \_\_\_\_\_

Hobbies or strong interests (include musical talents)

\_\_\_\_\_

Are you? (Circle all appropriate): OUTGOING QUIET LEADER FOLLOWER

Do you have any physical disabilities or chronic illnesses that might limit your participation in three full days of Tres Dias (i.e. diabetes, cardiac, depression, hearing problem, vision problem)? If so please describe

Special medication we should know about? Describe

\_\_\_\_\_

In case of an emergency contact \_\_\_\_\_ (Name & phone number)

**Please give a brief description as to why you wish to attend and what you hope to gain from it:**

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

All meals are served **Family Style**

Do you have any dietary needs?

\_\_\_ Lactose intolerant

\_\_\_ Glucose Issues

\_\_\_ Diabetic

\_\_\_ Vegetarian

\_\_\_ Vegan (No Meat, Dairy or Egg)

\_\_\_ Food Allergies \_\_\_\_\_  
\_\_\_\_\_

\_\_\_ Other explanations: \_\_\_\_\_  
\_\_\_\_\_

**\*Signature\***

\_\_\_\_\_  
(Applicant's signature)

There are limited openings for each weekend. You will be notified of your status before the requested weekend.

**A Registration fee of \$25 should accompany this application.**

**\*SPONSOR\***

After careful thought and prayerful consideration, I commit myself to support this applicant BEFORE, DURING and AFTER the weekend.

\_\_\_\_\_  
(Sponsor's name)

\_\_\_\_\_  
(Sponsor's weekend . . . where and when)

\_\_\_\_\_  
(Sponsor's address)

\_\_\_\_\_  
(Area)

\_\_\_\_\_  
(Telephone no.)

**\*CLERGY\***

I am aware that this applicant intends to make a Tres Dias weekend. If I have any questions, I will contact the sponsor.

\_\_\_\_\_  
(Clergy signature)

\_\_\_\_\_  
(Church address)

\_\_\_\_\_  
(Zip)

\_\_\_\_\_  
(Area)

\_\_\_\_\_  
(Telephone no.)

# VERMONT TRES DIAS - SPONSOR'S FORM

Except for name and address, all information provided will be kept in strictest confidence. This form must be completed and submitted before a Pilgrim can be accepted for Tres Dias. Submit this form with the Pilgrim's application. **PLEASE PRINT.**

TODAY'S DATE \_\_\_\_\_ REQUESTED TRES DIAS WEEKEND DATE \_\_\_\_\_

PILGRIM'S NAME \_\_\_\_\_

WHY DO YOU THINK THAT THIS PILGRIM SHOULD MAKE A TRES DIAS?

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HOW WELL DO YOU KNOW THE PILGRIM? \_\_\_\_\_

\_\_\_\_ I BELIEVE THAT MY PILGRIM WILL HAVE AN OPEN ATTITUDE TOWARDS SEEKING A CLOSER RELATIONSHIP WITH CHRIST.

HOW WOULD YOU DESCRIBE THE PILGRIM? (Leader, Follower, Quiet, Outgoing,) \_\_\_\_\_

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TO YOUR KNOWLEDGE, DOES THE PILGRIM HAVE ANY PHYSICAL, SPIRITUAL, EMOTIONAL PROBLEMS OR HAVE ANY LIFE CHANGES OCCURED THAT WOULD INHIBIT THEIR EXPERIENCE ON THE WEEKEND? (DEATH, DIVORCE, ETC) IF YES, PLEASE SPECIFY.

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ARE YOU ACTIVE IN FOURTH DAY ACTIVITIES? (Yes or No)

REUNION GROUP \_\_\_\_\_ SECUELA \_\_\_\_\_

OTHER (Specify) \_\_\_\_\_

ample: In local secretariat, attended Tres Dias School, etc.)

ARE YOU AWARE OF YOUR SPONSORSHIP RESPONSIBILITIES AS OUTLINED ON THE REVERSE SIDE OF THIS FORM UNDER WEEKEND SUPPORT AND FOURTH DAY ACTIVITIES?

YES  NO

WHAT SUPPORT WILL YOU PROVIDE THE PILGRIM ON THE TRES DIAS WEEKEND? (Transportation, Palanca, Attendance at closing, etc.)

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OTHER INFORMATION WHICH MIGHT BE HELPFUL TO BETTER SUPPORT YOUR PILGRIM ON THE WEEKEND.

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## SPONSORSHIP

Sponsorship must be viewed as a total commitment, not just a partial act of selection. Sponsorship means to help someone become more of a leader for Christ through the Tres Dias experience. As a sponsor consider the following:

1. Recognition that Tres Dias is not for everyone. Offering Tres Dias to someone comes only after I am willing to make a significant commitment to that person. If I am not willing to make that commitment, I should not sponsor.
2. Have I honestly looked at my reasons for sponsoring?
3. Do I know the person or do I just know about the person?
4. Have I prayed for guidance and sought council with other experienced pescadores? Is this the right time for the Pilgrim?
5. How do I feel regarding sponsorship of this person's spouse? If possible the applications for married couples should be submitted together.
6. Am I willing to make a significant commitment to my Pilgrim?

## WEEKEND SUPPORT

Sponsors should support Pilgrims on the weekend by: providing transportation, praying for the weekend, providing a general palanca letter to the weekend, a personal palanca letter to their Pilgrim, offering to help the Pilgrim's family, providing a babysitter for children if needed, attending the closing and any other needs that would be helpful.

## FOURTH DAY SUPPORT

The sponsor should recognize that a commitment is being made to the Pilgrim by sending the Pilgrim to Tres Dias. The sponsor should help the new pescadore to live the fourth day as it is presented on the weekend, by encouraging the new pescadore to join (or form) a Reunion Group and to attend Secuelas and Secretariat meetings. In general, the sponsor should be responsive to the needs of the new pescadore until the new pescadore is established in the Fourth Day.

I have read the above:

YOUR SIGNATURE: \_\_\_\_\_

YOUR NAME \_\_\_\_\_  
(first) (middle) (last)

ADDRESS \_\_\_\_\_  
(Zip) (area) (telephone no.)

YOUR CONGREGATION \_\_\_\_\_

WHERE AND WHEN DID YOU MAKE YOUR TRES DIAS?

\_\_\_\_\_

**Send with Pilgrim's application and registration fee to:**

Cheryl Lake  
PO Box 82  
Northfield Falls, VT 05664

**calake56@gmail.com**