



CORNERSTONE CHRYsalis BOARD APPLICATION

NAME _____ AGE 16-18 _____ 19-25 _____ OVER 25 _____

ADDRESS _____ PHONE _____

EMAIL _____

CHURCH _____ PASTOR _____

YOUR WALK/FLIGHT/JOURNEY NUMBER _____ CHECK ONE: Cornerstone Chrysalis _____ DaySpring _____ Louisville _____
OTHER please list _____

POSITIONS WORKED ON CHRYsalis FLIGHTS/JOURNEYS _____

IN WHAT OTHER WAYS HAVE YOU SERVED / SUPPORTED CHRYsalis DURING THE PAST YEAR? (meals, candlelight, prayer chart etc.) _____

HAVE YOU SPONSORED ANYONE ON A CHRYsalis FLIGHT OR JOURNEY? YES _____ NO _____
IF YES, WHEN? _____

ARE YOU IN A NEXT STEPS OR REUNION GROUP? YES _____ NO _____
IF YES, WHICH ONE? _____

HAVE YOU EVER SERVED ON AN EMMAUS OR CHRYsalis BOARD? YES _____ NO _____
IF YES, WHEN? _____ WHERE? _____

IN WHAT OTHER AREAS HAVE YOU SERVED IN A LEADERSHIP CAPACITY FOR YOUTH? (SS, mission trips, youth groups, etc.) _____

DESCRIBE YOUR PRESENT WALK WITH THE LORD. _____

WHY DO YOU WANT TO SERVE ON THE CHRYsalis BOARD? _____

HOW COULD YOU MAKE A DIFFERENCE AS A CHRYsalis BOARD MEMBER? _____

REFERENCES (Please list at least three)

NAME	PHONE	ADDRESS	EMAIL

Please mail to:
Cornerstone Chrysalis
P.O. Box 7
Goshen, KY
40026

Revised 02/12/2009