



YOUNG ADULT CHRYSALIS APPLICATION TO SERVE

Name: _____

Address _____

City, State, Zip _____

Phone _____ E-mail _____

Weekend Attended: _____

Church: _____

List your experience in Chrysalis, Emmaus, Epiphany, Kairos or other Three-Day organizations.

Share your gifts, talents and interests.

Return completed form to:

Alabama Young Adult Chrysalis
P.O. Box 55685
Birmingham AL 35255