



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

Spouse: \_\_\_\_\_

Email(s): \_\_\_\_\_

Cell(s): \_\_\_\_\_

Age(s): \_\_\_\_\_

Which type of small group are you looking for? (1st Choice, circle one)

Co-Ed      Couples      Men      Women      Multigenerational

Which type of small group are you looking for? (2nd Choice, circle one)

Co-Ed      Couples      Men      Women      Multigenerational

What *day(s)* and *times* are you available for group meetings?

\_\_\_\_\_

Please list names of couples or persons that you would like to be in group with.

\_\_\_\_\_

\_\_\_\_\_

Will you need childcare (circle one) **(Currently not available)**    Yes    No

Have you ever been in a small group (circle one)?    Yes    No

Questions/Comments?

\_\_\_\_\_

\_\_\_\_\_

**Please return to Tracy Christensen**