



## Sisterhood 2007-2008 Member Profile and Survey

**\*\*Special Survey Raffle:** *Have your survey completed and submitted by October 1, 2007 and your name will be entered for a drawing at Matannah Dinner on Thursday, October 18, 2007.*

Send forms back to: Sisterhood Survey, Congregation Beth Israel, 15 Jamesbury Drive, Worcester, MA 01609

1. Member Name: \_\_\_\_\_ Member Hebrew Name: \_\_\_\_\_
2. Name of Spouse if applicable: \_\_\_\_\_ Spouse Hebrew Name: \_\_\_\_\_
3. Member Birthday: \_\_\_\_\_ If applicable Wedding Anniversary: \_\_\_\_\_
4. The best time for me to attend meetings/programs: *(please circle)*  
Sunday Mornings    Sunday Afternoons    Weekday Mornings    Afternoons    Evenings
5. Member Occupation at Present Time: \_\_\_\_\_
6. Number of Children if applicable: \_\_\_\_ Age(s): \_\_\_\_, \_\_\_\_, \_\_\_\_, \_\_\_\_, \_\_\_\_, \_\_\_\_.
7. Number of Grandchildren if applicable: \_\_\_\_ Age(s): \_\_\_\_, \_\_\_\_, \_\_\_\_, \_\_\_\_, \_\_\_\_, \_\_\_\_, \_\_\_\_.
8. If child care was available, it would make a difference in my participation: Yes or No
9. I am available for childcare: Day(s)    Afternoon(s)    Evening(s)
10. If transportation was available it would make a difference in my participation: Yes or No
11. I can provide transportation for 1 2 3 passenger(s) to programs and events: Yes or No
12. I want to come to Sisterhood programs/meetings primarily for: *(please circle)*  
Entertainment    Education    Camaraderie    Dialogue    Religious Programs  
Other: \_\_\_\_\_
13. I have circled my talent(s): Performing Arts    Creative Writing    Photography    Art  
Hand Crafts    Fitness    Lamase/Laleche Coach    Computers    Cooking    Naturalist  
Book Discussions    Hebrew Studies    Certified Instructor for CPR/Defibrillator  
Other(s): \_\_\_\_\_

*Thank you for helping us work towards meeting the needs of our Sisterhood members.*

Signature: \_\_\_\_\_ Date of Survey: \_\_\_\_\_