

Chavurah Questionnaire

Please let the New Road to Engagement Committee know what your interests are and the kind of people you like to be with. We will use the information to connect you to others with similar interests.

NAME of Adult 1:			
Gender	Age	Occupation	Where were you raised?
Email address	Phone	How do you prefer to be contacted? (email, phone, mail)	
NAME of Adult 2:			
Gender	Age	Occupation	Where were you raised?
Email address	Phone	How do you prefer to be contacted? (email, phone, mail)	
Do you have children? If so, please tell us about them.			
Name of Child 1:			
Gender	Age	Current school (if applicable)	Current occupation (if applicable)
Name of Child 2:			
Gender	Age	Current school (if applicable)	Current occupation (if applicable)
Name of Child 3:			
Gender	Age	Current school (if applicable)	Current occupation (if applicable)
Do you have grandchildren? If so, please tell us their gender and ages			
Please tell us about the kind of people you like to be with. Check as many as you want.			
<input type="checkbox"/> Singles	<input type="checkbox"/> Couples	<input type="checkbox"/> Mixed Ages	<input type="checkbox"/> Same age as adults
<input type="checkbox"/> Families with same age children	<input type="checkbox"/> Please, no children	<input type="checkbox"/> Single parents	<input type="checkbox"/> Retired
<input type="checkbox"/> Gay/Lesbian	<input type="checkbox"/> Interfaith families	<input type="checkbox"/> Single/married	<input type="checkbox"/> No preference
Please tell us about activities that you may be interested in. Please check as many as you want.			
<input type="checkbox"/> Shabbat Celebration	<input type="checkbox"/> Celebration of Jewish Holidays	<input type="checkbox"/> Social Action/Mitzvah Activities	
<input type="checkbox"/> Religious Studies	<input type="checkbox"/> Political Issues	<input type="checkbox"/> Dinners	<input type="checkbox"/> Book Discussions/Speakers

Please tell us about your interests (Jewish or otherwise). Examples: sports as a participant or spectator and what kind of sport, concerts, theater, dancing, cooking, crafts, movies, etc.

Thank you for your participation! Please return this questionnaire to the Temple Office.