

Youth Interest Survey

Please answer the questions below and add any comments that you think will be helpful as we plan activities and set goals for the year ahead.

Activities

1. Put a check in the box next to each activity in which you would like to participate.

- | | |
|--|---|
| <input type="checkbox"/> Christmas Party | <input type="checkbox"/> Sledding |
| <input type="checkbox"/> New Year's Eve Movie Night | <input type="checkbox"/> Trip to EMP Experience |
| <input type="checkbox"/> Afternoon Hike and Picnic | <input type="checkbox"/> Music Project |
| <input type="checkbox"/> Basketball Night | <input type="checkbox"/> Trip to a Minor League |
| <input type="checkbox"/> Barbeque and Game Night | <input type="checkbox"/> Baseball Game |
| <input type="checkbox"/> Bowling | <input type="checkbox"/> Overnight Camping Trip |
| <input type="checkbox"/> Skiing | <input type="checkbox"/> Weekend Camping Trip |
| <input type="checkbox"/> Other Ideas (your suggestions here) _____ | |

- Community Service Projects – feed the homeless, yard work for elderly or (your suggestions here) _____

2. List activities that you would like to invite your friends to.

3. If the youth group had a regular evening fellowship night, how often would you like to meet, what would you like that night to include, and would you be likely to attend?

Write your name, address, phone number, and email here.
