Christian Faith Center Greeter Survey

PLEASE PRINT ALL ANSWERS

NAME: _____

ADDRESS: _____

PHONE: _____

EMAIL ADDRESS: _____

Do you have a friend/spouse you would like to serve with? _____
(if so, please name him or her)

Do you have a name tag? YES NO

What position do you prefer?

Door Opener _____ Winter Summer	Greeter _____ Winter Summer	Wherever needed _____ Winter Summer

Which service(s) do you prefer? Please number in order of preference.

8:30 AM _____ 10:00 AM _____ 11:30 AM _____

What Sundays are you available to serve? 1st 2nd 3rd 4th 5th

Are you available to serve more than once a month? YES NO How many? ___

Do you speak Spanish? YES NO

Can you be called as a substitute when needed? YES NO

Are you available for special events? YES NO

Are you a teen-ager? YES NO

Comments: