Thank you for attending our Summer GAP Event.

I have a few questions that your answers would be really appreciated for future planning of upcoming events. On any questions that you mark "Yes", then please circle any corresponding answers. If you circle "no", skip on to the next question. If you choose to, you can email your answers to hall4thee@gmail.com or mail them back to First United Methodist Church, 2490 W. State Rd., West Branch, MI 48661. Thank you in advance!

Would your family be interested in any additional GAP Family gathering(s) that offer:

1. Additional games or pool or other events are planned? No Maybe Yes
   b. How often: Weekly 2 times a month once a month every other month
   c. Which day(s) Mon Tues Wed Thurs Fri Sat Sun
   d. What time? Morning: 10-11:30 am Afternoon: 1 – 3pm Early Evening: 4 – 5:30 Evening: 5 – 6:30pm
   e. Suggestion of activities you would like to see coordinated? _____

2. Where a Bible lesson/games/crafts/snack took place? No Maybe Yes
   f. How often: Weekly 2 times a month once a month every other month
   g. Which day(s) Mon Tues Wed Thurs Fri Sat Sun
   h. What time? Morning: 10-11:30 am Afternoon: 1 – 3pm Early Evening: 4 – 5:30 Evening: 5 – 6:30pm

3. Where an after school group met for 1st through 6th graders? No Maybe Yes
   i. How often: DAILY WEEKLY 2 times a WEEK once a month every other month
   j. Which day(s) Mon Tues Wed Thurs Fri Sat Sun
   k. What time? Morning: 10-11:30 am Afternoon: 1 – 3pm Early Evening: 4 – 5:30 Evening: 5 – 6:30pm

4. A Bible Study for the Whole family? No Maybe Yes
   a. How often: Weekly 2 times a month once a month every other month
   b. Which day(s) Mon Tues Wed Thurs Fri Sat Sun
   c. What time? Morning: 10-11:30 am Afternoon: 1 – 3pm Early Evening: 4 – 5:30 Evening: 5 – 6:30pm
   d. Suggested topics or themes? _____

5. Where your older children 5th through 8th and 9th through 12th grades could participate in an age appropriate youth group(s)? No Maybe Yes
   e. How often: Weekly 2 times a month once a month every other month
   f. Which day(s) Mon Tues Wed Thurs Fri Sat Sun
   g. What time? Morning: 10-11:30 am Afternoon: 1 – 3pm Early Evening: 4 – 5:30 Evening: 5 – 6:30pm
   h. Suggested topics or themes? _____

6. Would a Day Care for your little ones be an answer for your family's needs? No Maybe Yes
7. Is there anything else we could assist your family with besides the offerings listed above or our GAP Kid's Camps? No Maybe Yes
   a. If so, what? _____
8. Would you be able to, or do you know of someone, a grandparent/ aunt/ uncle and/or other family member, who like to volunteer at our program(s)? No Maybe Yes
   i. How often: Weekly 2 times a month once a month every other month
   j. Which day(s) Mon Tues Wed Thurs Fri Sat Sun
   k. What time? Morning: 10-11:30 am Afternoon: 1 – 3pm Early Evening: 4 – 5:30 Evening: 5 – 6:30pm
   l. Suggested events willing to assist with? _____

Please share your name: Date

_____ _____

Contact information: _____