

# COFFEE, CAKE, & CONVERSATION

NAME: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

*please rank your widows ministry needs in order of importance from 1-6, with 1 being the most important.*

|   |  |
|---|--|
| <input type="checkbox"/> Car care ministry    | <input type="checkbox"/> Home maintenance ministry |
| <input type="checkbox"/> Social ministry      | <input type="checkbox"/> Card & book ministry      |
| <input type="checkbox"/> Small group ministry | <input type="checkbox"/> Freezer meal ministry     |

*I would like to join...*

Small group Ministry  
 Social ministry

WHAT IS YOUR HOME CHURCH?  
\_\_\_\_\_

DO YOU WORK?  
 YES     NO

IF SO, WHAT IS YOUR OCCUPATION?  
\_\_\_\_\_

HOW LONG HAVE YOU BEEN WIDOWED?  
\_\_\_\_\_

DOES YOUR CHURCH HAVE A WIDOWS PROGRAM?  
\_\_\_\_\_



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*Please share your thoughts on each ministry. Would you be interested in participating? Do you have any specific requests or ideas?*

Social: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Small group: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Practical: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Card & book ministry: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Freezer meal ministry: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Thank you for sharing your response! We look forward to connecting with you in the near future.*