



Current Member Survey

First Family Member: _____ Phone: _____

Address: _____

Email: _____ Birthday (Month/Day): _____

Current/Former Occupation: _____

Hobbies/Interests: _____

How many years have you been a member of Torch? _____

Second Family Member: _____ Phone: _____

Email: _____ Birthday (Month/Day): _____

Current/Former Occupation: _____

Hobbies/Interests: _____

How many years have you been a member of Torch? _____

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What topic(s)/speakers would you like to have at Torch? _____

What could be done to improve Torch Club meetings? _____
