

Guardian Angels Small Group Interest Form

Name: _____

Street: _____

City/State/Zip: _____

Phone: _____ Email: _____

What days of the week do you prefer to meet? Circle all that apply.

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY SUNDAY

What time to you prefer to meet? Circle all that apply.

MORNING DAYTIME EVENING

How far away from the church are you willing to go to meet (one mile, five miles)?

What are your interests? _____

Please put this sheet into collection baskets or mail to Kate Riha at Guardian Angels at 1310 Westport Road, Kansas City, MO 64111. Can be emailed to Kate at kriha@guardianangelskc.org.