College Hill is a Congregation that Cares About YOU!

The completion of this survey will greatly assist with the assessment and care of our College Hill family, so we thank you for taking the time to fill it out.

Are you ready to get started?

Have you had times in the past when you recei	ved support and
care from your College Hill church family?	Yes/No

If so, please circle any of the following that apply:

Hospital v	isit	Home visit	Meals or snack	(S	Care Card
Transportation	Mii	nor domestic	help or repairs	P	hone calls/Emails
Other:					

Please circle any of the following needs that you or a member of your family may have, that would help us be better aware of ways that we may be of help currently or in the future:

Chronic Illness Disability Transportation Needs

New Baby or Adopted Child Care for Elderly

Surgery or Hospital Stay Emotional Support

Otner Needs:			

Like others in our church family, you may occasionally like to be of assistance to members when their life situation calls for love and support. Please circle all that apply and indicate your availability:

Hospital Visits	Frequently	Occasionally	Rarely
Meals or Snacks	Frequently	Occasionally	Rarely
Transportation	Frequently	Occasionally	Rarely
Minor Home Repairs	Frequently	Occasionally	Rarely
Light Domestic Help	Frequently	Occasionally	Rarely
Pet Care	Frequently	Occasionally	Rarely
Home Visits	Frequently	Occasionally	Rarely
Sending Cards	Frequently	Occasionally	Rarely
Phone Calls	Frequently	Occasionally	Rarely
Running Errands	Frequently	Occasionally	Rarely

Please See Back to Complete

Other: _____

Name:			
Address:			
Phone Nu	ımbers:	Cell:	
Home	Work	Cell	

\(\text{Lastly, please provide your name and contact information below:} \)

To Request
Congregational Care:
Call Church Office at:
918.592.5800

When Love and Support are Needed...

Our College Hill Congregation Cares and Responds



THANK YOU!

CH Congregational Care Ministry Team