

Name _____

Birthdate (year optional) _____ Age (optional) _____

Place of birth _____

Where did you live while growing up? _____

What was your favorite subject in school? _____

Favorite meal _____

Type of work you do/did _____

Hobbies/Activities you enjoy _____

Address _____

Phone # (home) _____ (cell) _____

Email _____

Check one : Married _____ Single _____ Widow _____ Widower _____

Check all appropriate: Retired _____ Working _____

Driving _____ Not driving _____

Preferred time for OWL activities: Morning _____ Lunchtime _____ Evening _____

Preferred day of the week: Mon. _____ Tues. _____ Wed. _____ Thur. _____ Fri. _____ Sat. _____ Sun. _____

I would be interested in helping with OWL events. Set-up _____ Clean-up _____

Planning _____