

EUREKA LODGE #64 INFORMATION SHEET

In an effort to build the lodge, we MUST share information to better communicate as brothers. We will use the information to organize and plan our events, to build a directory, for brothers to know where a brother is and how they can assist.

BROTHERS

Full Name (please print): _____

Mailing Address: _____

Home Phone: _____ City _____ Zip Code _____
Mobile: _____

Occupation: _____ Mon. Tue. Wed. Thurs. Fri. Sat. Sun.

Retired: Time: _____

Occupation Address: _____

City _____ Zip Code _____

BEST METHOD OF COMMUNICATING (list in numerical order with 1 being the greatest)

- | | |
|--|--|
| <input type="checkbox"/> Email | <input type="checkbox"/> Phone Call |
| <input type="checkbox"/> Group Message | <input type="checkbox"/> Social Media |
| <input type="checkbox"/> Mail | <input type="checkbox"/> Text Messages |

SOCIAL MEDIA LIST (mark all that apply to you)

LinkIn Facebook Instagram Google Docs Snapchat Other: _____

Would you like to see Eureka do a weekend retreat in place of a summer meeting: Yes No

Do you want to have calendar events emailed to you: Yes No

If so, what is the email address preferred _____

Do you prefer to have floating round table meetings to discuss fraters and school of instruction questions?

Yes No If so, would you be willing to host? Yes No

EVENTS

List numerically (1-4) with 1 being the most your preferred strengths to contribute to events

Fundraiser Donor Planner Laborer

Do you prefer to have school of Instruction & Fraters on 2nd Sunday? Yes No

Do you prefer to have it a weeknight during the week? Yes No If so, please list what day _____

Do you prefer to have committee meeting by conference call? Yes No

If so, would you commit to attend? Yes No

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COMMITTEE UPDATES

List any widows/orphans of Eureka 64 and their contact information to have them added to our widow/orphan list.

Full Name

Contact Number

Full Name

Contact Number

List any sick and shut in brother's you are aware of and their contact information to have them added to our sick/shut in list

Full Name

Contact Number

Full Name

Contact Number

ADDITIONAL INFORMATION

List ALL other houses you belong to and day of the month and time of meeting:

House

Day of the month and time of meeting

House

Day of the month and time of meeting

House

Day of the month and time of meeting

House

Day of the month and time of meeting

House

Day of the month and time of meeting

House

Day of the month and time of meeting

SUGGESTIONS

Suggestions for Eureka Lodge #64 for this upcoming year
