

Community Religious Survey

Hello. My name is _____ and this is _____. We are conducting a very brief community religious survey. Would you be willing to answer just four quick questions?

1. Do you have a church or religious preference?

- | | |
|--|--------------------------------------|
| <input type="checkbox"/> Catholic | <input type="checkbox"/> Hinduism |
| <input type="checkbox"/> Other Christian _____ | <input type="checkbox"/> Buddhism |
| <input type="checkbox"/> Judaism | <input type="checkbox"/> No Religion |
| <input type="checkbox"/> Islam | <input type="checkbox"/> Other _____ |

2. Do you attend a place of worship? Yes No

If Yes, how often are you able to attend? Consistently Occasionally Almost Never

3. Do you believe that if the Bible were read and followed it would help people solve some of the problems they face today? Yes No

Why or why not? _____

4. Suppose four seminars were being held in this town and you were going to attend two. Which two of the following would you attend?

- Health *(plant-based cooking, weight loss, depression recovery, disease prevention, stop smoking, etc.)*
- Family *(marriage enrichment, strengthening parent/child relationships, etc.)*
- Practical Christian Living *(how to have a relationship with God, study the Bible, etc.)*
- Biblical Archaeology *(archeological findings that give authenticity to the Bible)*
- Bible Prophecy *(end-time events, understanding the book of Revelation, etc.)*

Thank you for participating in our survey. Your answers help us know how to plan community events in the future. *(If an event is upcoming, tell them how they can attend and provide an event flyer.)*

To everyone who completes our survey, we are offering a series of study guides on some of the most commonly asked questions people have about the Bible *(show a sample guide)*. Would you be interested in receiving these FREE Bible study guides? *(If Yes, leave the first guide and explain when you will bring the next one. You can also offer to meet to review and study the guide together.)*

Name: _____

Address: _____

Left behind first study guide: Yes No

Appointment to bring next study guide: Day _____ Time _____

Names of Surveyors: _____