

Harmony Grove Vision Team 2015 Church Survey

As part of our Vision Team objectives, we would appreciate your help in completing a church survey,

Please take a few minutes to complete the survey below and put it in the box at the back of the sanctuary.

If you don't feel comfortable answering any of the questions, please feel free to leave them blank.

DEMOGRAPHIC DATA

1. Age Group:
 <16 16-20 21-30 31-40 41-50 51-60 61-70 > 70
2. Gender Male Female
3. Marital status:
 Married Widowed & single
 Divorced & remarried Divorced & single
 Widowed & remarried
 Separated
 Single < age 25 Single > age 25
4. Do you have a personal relationship with Christ?
 Yes No Unsure
5. When did you begin a personal relationship with Christ?
 Age 1-5 Age 6-12 Age 13-17 Age 18-29
 Age 30-39 Age 40-49 Over 60
6. How did you begin your personal relationship with Christ?
 Parents Friend/relative Sunday School teacher
 My own search Small group Bible study Other
 Church outreach/visitation Radio/TV
7. Do you trust Christ as your personal Savior as a direct result of a member or ministry of THIS church?
 Yes No Unsure

8. How long have you been a Christian? ___ year(s)
9. How long have you attended this church? ___ year(s)
10. Has attending this church caused your spiritual life to grow?
___ Yes ___ No Please explain

11. How far do you live from the church?
___ < 5 miles ___ 5-10 miles ___ 10-20 miles ___ > 20 miles

12. Which service(s) do you normally attend?
___ Sunday School ___ Sunday AM ___ Sunday PM ___ Wednesday night
If you don't attend a particular service/program, please tell us why.

13. Do you have children under the age of 18? ___ Yes ___ No
If yes, how many?

14. If your children are still school age, do they attend?
___ Youth group ___ AWANA ___ Sunday School

15. What is your church background?

CHURCH DATA

16. What attracted you to this church for the first time?

- ___ This church is close to our home
___ Website ___ Newspaper
___ Invitation from a friend or relative
___ A special activity, program, or church ministry
(VBS, Easter Egg Hunt, Passion Play, Clothing Ministry, etc.)
___ Other _____

17. What are the three most important factors in getting your family to regularly attend this church? (Please order 1, 2, and 3)

- | | |
|---|---|
| <input type="checkbox"/> This church is close to our home | <input type="checkbox"/> Welcome atmosphere |
| <input type="checkbox"/> Preaching God's Word | <input type="checkbox"/> Style of worship |
| <input type="checkbox"/> The children's programs met our needs | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> The adult programs met our needs | _____ |
| <input type="checkbox"/> The church ministered to us in a time of need | |
| <input type="checkbox"/> Some of our friends/family already attended here | |

18. When was the last time you invited or brought someone to church?

19. What kind of event would encourage you to actually invite someone to church?

For the following questions, please attach additional pages if necessary.

20. List the personal and family needs you have with which you need the help of this church:

21. How can the church help meet the needs of you and your family?

22. Do you know your spiritual gift? If yes, please list:

23. What is a special talent, ability, or skill you have with which you can help this church?

24. What are the strengths of this church?

25. What are some of the areas where this church needs to become stronger?

26. What does this church need to do to improve these areas?

27. What would cause you to leave the church?

28. What makes this church unique in this community?

29. What ministry programs would you like to see added to or removed from what the church is presently doing?

30. What one word would you use to best describe our congregation at this point in its history?

31. Would you be willing to have prayer meeting, youth group on another night?

Yes No Undecided

32. Would you be interested in attending a small group, prayer group or a special service on a Sunday night instead of a regular evening service?

Yes No Undecided Please explain:

33. Would you bring your friends to this church (Sunday School, Children/Youth program, Sunday services, etc.)?

Yes

No

If yes, why?

If no, why not?

34. Where do you get most of your news (radio, TV, newspaper, internet, etc.)?

35. Which type of teaching do you prefer?

Corporate Small Group Discussion Group

36. Would you attend a Bible study or training seminar during the week?

Yes No

37. Do you use the internet? Yes No

38. Do you use social media (Facebook, Twitter, etc)? Yes No

39. Do you have email? Yes No

40. Check one type of Christian education subject that would be most helpful to you at this time in your spiritual growth?

Psalms or Proverbs Other New Testament books _____

Gospels or Acts Other Old Testament books _____

Bible topic such as Parables, Love, Life of Christ, etc.

Practical "how- to's" of the Christian life.

Theological topics such as Doctrines, Bible interpretation, Prophecy, etc.

Other _____

41. What version of Bible do you use? _____

42. Is the church effectively communicating the vision and future of the church?

Yes No If No, how would you like to receive more information?

FUTURE VISION

43. Describe the church of your dreams. What does it look like?

44. How would you like to see our church grow in the next five (5) years?

45. If you were in a position of making this decision, what would you select as the next priority for the church's ministry and growth?

46. Please feel free to offer additional comments.