

GRAND CHAPTER COMMITTEE INTEREST SURVEY

NAME: _____

ADDRESS: _____

PHONE # _____ EMAIL: _____

CHAPTER(S): _____

COMMITTEES I AM INTERESTED IN SERVING ON:

<input type="checkbox"/> Alexandra Schencking Nursing Scholarship	<input type="checkbox"/> Appeals & Grievances
<input type="checkbox"/> Audit Committee	<input type="checkbox"/> Bowling Tournament
<input type="checkbox"/> By-Laws, Chapter	<input type="checkbox"/> Cancelled Stamps for Cancer
<input type="checkbox"/> Cancer Project Fund	<input type="checkbox"/> Constitution & By-Laws Review
<input type="checkbox"/> Credentials	<input type="checkbox"/> Eastern Star Scholarship
<input type="checkbox"/> Eastern Star Charities Foundation	<input type="checkbox"/> Finance
<input type="checkbox"/> ESTARL	<input type="checkbox"/> General Fund Raising
<input type="checkbox"/> Hands Across the Border	<input type="checkbox"/> Heart Project
<input type="checkbox"/> Historian / Librarian	<input type="checkbox"/> Hospice
<input type="checkbox"/> Jurisprudence	<input type="checkbox"/> International Headquarters
<input type="checkbox"/> Necrology	<input type="checkbox"/> Membership Committee
<input type="checkbox"/> Our World of Youth	<input type="checkbox"/> OES Golf Tournament
<input type="checkbox"/> Registration	<input type="checkbox"/> Parliamentarian
<input type="checkbox"/> Service Dogs GGC	<input type="checkbox"/> Ritual Competition
<input type="checkbox"/> Tellers	<input type="checkbox"/> Session Site Selection
<input type="checkbox"/> WGM scrapbook	<input type="checkbox"/> Triennium Committee
<input type="checkbox"/> Yearbook	<input type="checkbox"/> Website
<input type="checkbox"/> WGM Special Project	<input type="checkbox"/> WGP scrapbook
	<input type="checkbox"/> WGP Special Project
GRAND CHAPTER SESSION COMMITTEES	
<input type="checkbox"/> Session Chair/Co-Chair	<input type="checkbox"/> Banquets
<input type="checkbox"/> Audio	<input type="checkbox"/> 50 Year Member Tea
<input type="checkbox"/> Decorations	<input type="checkbox"/> Grand Representatives Flags
<input type="checkbox"/> First Aid	<input type="checkbox"/> Photographer
<input type="checkbox"/> Set Up – I can be extra help	<input type="checkbox"/> Take Down – I can be extra help
<input type="checkbox"/> Vendors	<input type="checkbox"/> RV Parking
<input type="checkbox"/> Tours	<input type="checkbox"/> Transportation

Skills I have that may be useful:

<input type="checkbox"/> Microsoft Word	<input type="checkbox"/> Microsoft Excel	<input type="checkbox"/> Microsoft Powerpoint
<input type="checkbox"/> Flower arranging	<input type="checkbox"/> Banking	<input type="checkbox"/> Sewing
<input type="checkbox"/> Knitting/crocheting	<input type="checkbox"/> Photography	<input type="checkbox"/> Alterations
<input type="checkbox"/> Decorations	<input type="checkbox"/> Cooking/baking	<input type="checkbox"/> Event planning
<input type="checkbox"/> Certified First Responder	<input type="checkbox"/>	<input type="checkbox"/>

Events I'd like to help with:

<input type="checkbox"/> Grand Chapter	<input type="checkbox"/> Vendors at Grand Chapter	<input type="checkbox"/> Guard at Grand Chapter
<input type="checkbox"/> Page at Grand Chapter	<input type="checkbox"/> Help at Gr Chapter Office	<input type="checkbox"/> Golf Tournament
<input type="checkbox"/> Bowling Tournament	<input type="checkbox"/> Fundraising	<input type="checkbox"/> Corsage Bar at Gr Chapter

This form will be considered active for two years from the date submitted. The form will be held for use by the Associate Grand Conductress, Grand Conductress, and Associate Grand Matron to assist in their consideration of appointments to Grand Chapter Committees and other volunteer opportunities within Grand Chapter. Please include any additional information below that may be helpful.

I understand that completing this form does not guarantee that I will be selected for a committee, task, etc. _____ (signature)

Please email this form to: WAGCCCommittee@gmail.com
OR print and mail it to the AGM listed in the Blue Book.