



## House Meeting Participant Forms

### General information on House Meeting

House meeting leader/host name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Congregation (if applicable): \_\_\_\_\_

Note Taker Name: \_\_\_\_\_

Note Taker Phone: \_\_\_\_\_ Note Taker Email: \_\_\_\_\_

Date of House Meeting: \_\_\_\_\_ Location of House Meeting: \_\_\_\_\_

Total number of participants including leader and note taker: \_\_\_\_\_

*\*Please remember to submit completed forms and notes to GHIAA, along with house meetings notes.*

### *Three ways to submit:*

- **Online form (preferred):** Enter information from contact sheets and notes page into online google form which can be found here: [Online Google Form](#)
- **Email:** Take a picture of all of these pages and the notes pages and email to [ghiaa@cljct.org](mailto:ghiaa@cljct.org). Please make sure writing is legible if choosing this option!
- **Snail mail:** Mail or drop off forms to GHIAA, 47 Vine Street, Hartford, CT 06112.

**Participant 1**

**First Name (include title if applicable):** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Street address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Congregation Name and Town (if applicable):** \_\_\_\_\_

**In your own words, how would you describe your race or ethnicity?:** \_\_\_\_\_

*\*We ask about race/ethnicity because it is important that GHIAA centers the voices of people of color in real and authentic ways in the organizing process.*

**Gender pronouns (circle):**    **She/Her**        **He/Him**        **They/Them**        **Other:**

*\*We ask about gender pronouns so that we do not assume gender identities.*

**Age range:**    **15 - 19**                      **20 - 39**                      **40 - 59**                      **60 - 79**                      **80 - 109**

**Other demographic information that is important for you to share?** \_\_\_\_\_

**Participant 2**

**First Name (include title if applicable):** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Street address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Congregation Name and Town (if applicable):** \_\_\_\_\_

**In your own words, how would you describe your race or ethnicity?:** \_\_\_\_\_

*\*We ask about race/ethnicity because it is important that GHIAA centers the voices of people of color in real and authentic ways in the organizing process.*

**Gender pronouns (circle):**    **She/Her**        **He/Him**        **They/Them**        **Other:**

*\*We ask about gender pronouns so that we do not assume gender identities.*

**Age range:**    **15 - 19**        **20 - 39**        **40 - 59**        **60 - 79**        **80 - 109**

**Other demographic information that is important for you to share?** \_\_\_\_\_

**Participant 3**

**First Name (include title if applicable):** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Street address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Congregation Name and Town (if applicable):** \_\_\_\_\_

**In your own words, how would you describe your race or ethnicity?:** \_\_\_\_\_

*\*We ask about race/ethnicity because it is important that GHIAA centers the voices of people of color in real and authentic ways in the organizing process.*

**Gender pronouns (circle):**    **She/Her**        **He/Him**        **They/Them**        **Other:**

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**Age range:**    **15 - 19**                      **20 - 39**                      **40 - 59**                      **60 - 79**                      **80 - 109**

**Other demographic information that is important for you to share?** \_\_\_\_\_

**Participant 4**

**First Name (include title if applicable):** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Street address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Congregation Name and Town (if applicable):** \_\_\_\_\_

**In your own words, how would you describe your race or ethnicity?:** \_\_\_\_\_

*\*We ask about race/ethnicity because it is important that GHIAA centers the voices of people of color in real and authentic ways in the organizing process.*

**Gender pronouns (circle):**    **She/Her**        **He/Him**        **They/Them**        **Other:**

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**Other demographic information that is important for you to share?** \_\_\_\_\_

**Participant 5**

**First Name (include title if applicable):** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Street address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Congregation Name and Town (if applicable):** \_\_\_\_\_

**In your own words, how would you describe your race or ethnicity?:** \_\_\_\_\_

*\*We ask about race/ethnicity because it is important that GHIAA centers the voices of people of color in real and authentic ways in the organizing process.*

**Gender pronouns (circle):**    **She/Her**        **He/Him**        **They/Them**        **Other:**

*\*We ask about gender pronouns so that we do not assume gender identities.*

**Age range:**    **15 - 19**                      **20 - 39**                      **40 - 59**                      **60 - 79**                      **80 - 109**

**Other demographic information that is important for you to share?** \_\_\_\_\_

**Participant 6**

**First Name (include title if applicable):** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Street address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Congregation Name and Town (if applicable):** \_\_\_\_\_

**In your own words, how would you describe your race or ethnicity?:** \_\_\_\_\_

*\*We ask about race/ethnicity because it is important that GHIAA centers the voices of people of color in real and authentic ways in the organizing process.*

**Gender pronouns (circle):**    **She/Her**        **He/Him**        **They/Them**        **Other:**

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**Age range:**    **15 - 19**                      **20 - 39**                      **40 - 59**                      **60 - 79**                      **80 - 109**

**Other demographic information that is important for you to share?** \_\_\_\_\_

**Participant 7**

**First Name (include title if applicable):** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Street address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Congregation Name and Town (if applicable):** \_\_\_\_\_

**In your own words, how would you describe your race or ethnicity?:** \_\_\_\_\_

*\*We ask about race/ethnicity because it is important that GHIAA centers the voices of people of color in real and authentic ways in the organizing process.*

**Gender pronouns (circle):**    **She/Her**        **He/Him**        **They/Them**        **Other:**

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**Age range:**    **15 - 19**                      **20 - 39**                      **40 - 59**                      **60 - 79**                      **80 - 109**

**Other demographic information that is important for you to share?** \_\_\_\_\_



**Participant 8**

**First Name (include title if applicable):** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Street address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Congregation Name and Town (if applicable):** \_\_\_\_\_

**In your own words, how would you describe your race or ethnicity?:** \_\_\_\_\_

*\*We ask about race/ethnicity because it is important that GHIAA centers the voices of people of color in real and authentic ways in the organizing process.*

**Gender pronouns (circle):**   **She/Her**      **He/Him**      **They/Them**      **Other:**

*\*We ask about gender pronouns so that we do not assume gender identities.*

**Age range:**    **15 - 19**      **20 - 39**      **40 - 59**      **60 - 79**      **80 - 109**

**Other demographic information that is important for you to share?** \_\_\_\_\_

**Participant 9**

**First Name (include title if applicable):** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Street address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Congregation Name and Town (if applicable):** \_\_\_\_\_

**In your own words, how would you describe your race or ethnicity?:** \_\_\_\_\_

*\*We ask about race/ethnicity because it is important that GHIAA centers the voices of people of color in real and authentic ways in the organizing process.*

**Gender pronouns (circle):**   **She/Her**      **He/Him**      **They/Them**      **Other:**

*\*We ask about gender pronouns so that we do not assume gender identities.*

**Age range:**    **15 - 19**      **20 - 39**      **40 - 59**      **60 - 79**      **80 - 109**

**Other demographic information that is important for you to share?** \_\_\_\_\_

**Participant 10**

**First Name (include title if applicable):** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Street address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Congregation Name and Town (if applicable):** \_\_\_\_\_

**In your own words, how would you describe your race or ethnicity?:** \_\_\_\_\_

*\*We ask about race/ethnicity because it is important that GHIAA centers the voices of people of color in real and authentic ways in the organizing process.*

**Gender pronouns (circle):**   **She/Her**      **He/Him**      **They/Them**      **Other:**

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**Age range:**    **15 - 19**      **20 - 39**      **40 - 59**      **60 - 79**      **80 - 109**

**Other demographic information that is important for you to share?** \_\_\_\_\_