Your Ideas, Our Plans -Help us Shape the Future

We're reaching out to connect with older adults in our community who often face unique challenges and could benefit from our educational resources and support services. This survey helps us understand your interests and needs, allowing us to tailor offerings like our social activity groups, which provide a safe and welcoming space to connect, share experiences, and build camaraderie.

Please fill out the information below and return it to us. Your privacy is important to us—we never sell your information and only use it for our records.

First Name: Nickname (Preferred Name)	Last Name: :		
Address: City: Business Name (if applicable	State: e):	Zip:	
Email:			
What is the best way to cont	act you? □Phone □E cted about upcoming event	s, presentations or resources, please	
Activities: □ Arts, Crafts & Music □ Cards & Games □ Exercise & Fitness □ Social Groups	Education: ☐ Brain Health ☐ Budgeting/Finance ☐ Caregiver Education ☐ Caregiver Self-Care ☐ CPR/AED Training	☐ Manage Incontinence ☐ Medicare Education ☐ Nature Education ☐ 1-on-1 Tech Assistance ☐ POA Finance	
Support/Information: ☐ Advocacy ☐ Grounded Café ☐ Parenting Grandkids ☐ Support Groups ☐ Volunteer Opportunities	☐ Dementia Education ☐ Diabetes Education ☐ Health/Wellness ☐ Housing Transitions	□ POA Healthcare □ Preventing Falls □ Technology Education	
☐ Volunteer Opportunities Other: Let us know what you	would like to see at the ADRO	Prefer to anwser of Scan the QR co	