

Best Buddies International Colleges

MATCHING SURVEY



We are excited you are joining Best Buddies and want to be matched in a mutually enriching one-to-one friendship. Please complete this matching survey to help your chapter leaders and Best Buddies staff match you with someone who shares your interests.

Name: _____ Age: _____ Gender (circle one): **Male** **Female**

School Address: _____

Permanent Address: _____

Phone Number: _____ E-mail Address: _____

Emergency Contact Name: _____ Phone #: _____

Were you matched previously (if so, name)? _____

Do you have a specific person you would like to be matched with? _____

Circle two to four words that most describe you:

Outgoing	Athletic	Creative	Studious	Funny	Independent	Quiet	Compassionate
Talkative	Artistic	Friendly	Considerate	Gentle	Assertive	Shy	Other _____

Circle two to four things you like to do with your friends:

Eat with friends	Talk on the phone	Listen to music	Go to sporting events	Dance	Study
Watch movies/TV	Take bike rides	Play games	Read	Shop	
Visit with friends	Spend time with family	Play with animals	Play sports	Attend cultural events	
Participate in school activities	Play with animals	Other _____			

Name 2 talents and/or hobbies that you have:

How do you like to keep in touch with your friends? (circle all that apply)

write notes talk on the phone e-mail each other hang out together

What is your favorite TV show?

What is your favorite type of music? Who is your favorite singer/band?

Name any activities, clubs, or sports teams in which you participate.

Circle the days that are best for you to attend a Best Buddies group activity/ chapter meeting:

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Put an "x" in the boxes where you are available to meeting with your Buddy or attend events:

	9:00	10:00	11:00	12:00	1:00	2:00	3:00	4:00	5:00	6:00	7:00	8:00	9:00 pm
Monday													
Tuesday													
Wednesday													
Thursday													
Friday													
Saturday													
Sunday													

Why do you want to join Best Buddies? _____

Do you have any special requests about your Buddy? _____

Do you have a car? YES NO If yes, please attach a copy of your insurance.

If yes, are you willing to use your car to meet with your Buddy? YES NO

I (name) _____ want to be matched in a one-to-one friendship and will commit to establishing a true friendship with my Buddy. I agree to see my Buddy twice a month and to contact him/her weekly during the school year. I also agree to attend chapter meetings and activities. I will keep any information released to me about my Buddy confidential.

Signature: _____

Date: _____