



Z-Pal Questionnaire

1. Name:	
2. Birthday:	
3. Mailing Address:	
4. Phone Number:	
5. Email Address:	
6. Zonta Anniversary:	
7. Spouse/Significant Other's Name:	
8. Your Anniversary:	
9. Children (Name/Age/Sex):	
10. Pet(s)—(Name/Breed/Sex):	
11. Workplace (including address):	
12. Hometown:	
13. Hobbies/Interests:	
14. In my spare time I love to....	
15. Favorite Color(s):	
16. Favorite Local Restaurant(s):	
17. Favorite Local Store(s):	
18. Favorite Snack Food(s):	
19. Favorite Candy:	
20. Favorite Dessert?	
21. Favorite Drink(s):	
22. Favorite Scent(s):	
23. Favorite plant(s)/flower(s):	
24. Favorite Holiday(s):	
25. Do you collect anything? If so, what?	
26. Favorite Sports Team?	
27. House color(s)/Style(s):	
28. Do you have any strong dislikes?	
29. Are you allergic to anything? If so, what?	
30. Anything else that might help your Z-Pal ?	

When completed, please email to Robyn at: [housebuilding2005@yahoo.com](mailto:housebuilding2005@yahoo.com)