

## Exhibit 4

### Gurwin Adult Day Health Program Initial Recreation Interest Survey

ATTITUDE TOWARDS PARTICIPATING:

STRENGTHS:

#### Recreation Interests

**CODE:** Place a check (√) if this is a new interest.  
Place an (x) if this is a past interest.  
Place a check (√) and an (x) if a past interest is carried over and continue.

<b>SOCIAL:</b>	(√)	(X)	<b>CREATIVE/CULTURE:</b>	(√)	(X)
Parties			Dancing		
Trips			Dramatics		
Humor			Singing		
Clubs			Poetry		
Special Events			Writing		
Other			Other		

<b>PASSIVE/INDIVIDUAL:</b>			<b>GAMES/SPORTS:</b>		
Music Listening			Volleyball		
Movies/Videos			Bowling		
Reading			Bingo		
TV			Quiz		
Gardening			Cards		
Word Games			Checkers		
Cooking			Dominoes		
Other			Walking		
			Other		

<b>ARTS/CRAFTS:</b>			<b>DISCUSSION:</b>		
Needlecrafts			News & Views		
Painting/Drawing			Reminiscence		
Other			Other		

<b>SPIRITUAL:</b>			<b>COMMUNITY SERVICE:</b>		
Religious Services/Culture			Member Council		
Preference			Organizations		
			Volunteer Work		

Staff Signature/Title: \_\_\_\_\_ Date: \_\_\_\_\_