



City of Bells Questionnaire

Name of Church or Other Bell Location _____

Address _____ **Phone #** _____

Contact Person (Who programs the bells for ringing or, if a carillon, who is the primary performer?) _____

Contact Person Email address _____

About Your Bells - Please provide the following information:

1. Number of bells _____

2. Manufacturer of the bells _____

3. Age of the bells _____

4. Condition of the bells (i.e. perfect condition; working condition but need cleaning up; needs some repair; non-functioning) _____

5. Information about people memorialized or honored by the bells _____

6. When are the bells rung? (Please enter a weekly schedule and/or other times the bells sound). _____

7. Do you have an interesting story or historical fact about your bells? _____

Thank you! Questions? City of Bells 612-819-0345 Linda Holmen khmd@aol.com

Or mail to Linda Holmen @ 21096 Westbrook Drive, Cold Spring, MN 56320
