



MEMBER SURVEY

GENERAL INFORMATION

Member Name: _____ Date of Birth: _____

Spouse Name: _____ Anniversary: _____

Children's' Names & Ages: _____

Would childcare assist in your attendance at meetings: Yes No

Occupation/Title: _____ Employer: _____

Current affiliations with other organizations: _____

Present/Past Leadership Experience: _____

Date you joined Chapter: _____ Who recruited/referred you: _____

What area(s) of the chapter interest you most: _____

CHAPTER ACTIVITIES

What was your expectation of membership benefits when you joined the Chapter:

Has this expectation been met: Yes No

How can the Chapter better serve you as a member: _____

What do you feel is the most pressing need facing our community: _____

What can the chapter do to meet that need: _____

What current Chapter project do you find most value in: _____

What current Chapter project do you find least value in: _____

Please share an idea for a future project that would benefit our community and/or members: _____

ADDITIONAL INFORMATION

Do you plan to renew your membership: Yes No

If not, why: _____

Is there someone you would like to invite to join the chapter: Yes No

Name: _____ Email: _____

Phone: _____

Please share any additional thoughts you have for how we can improve our chapter for our members and our community: _____

