



MEMBER SURVEY

General Information:

Member's name: _____ Birthday: _____

Spouse's Name: _____ Anniversary: _____

Children's Names and Ages: _____

Would childcare assist in your attendance at meetings? Yes No

Would your child(ren) be interested in a Junior Jaycee/JCY Program: _____

Occupation/Title: _____ Employer: _____

Current affiliations with other organizations: _____

Past/Current Leadership Experience: _____

Date you joined JCI USA: _____ Who referred/recruited you? _____ How did you find out about the organization?: _____ Would you be interested in a leadership position in the future? If so, what area(s) interest you the most?

Chapter Activities

1.) Do you feel the place, day and time of our meetings is satisfactory? If no, what place, day and time would you suggest? Place _____ Day _____ Time _____

2.) If you could change one thing about our chapter, what would it be? _____

3.) What projects/programs do you feel are currently needed in our community? _____

4.) What projects/programs are we currently doing that interest you the most? _____

5.) Is there a project that we do now that you feel should be dropped? _____

6.) Is there a project that we don't do now that you feel should be added? _____

7.) How do you feel we could better serve the community? _____

8.) How could we better serve you as a member? _____

9.) Have you ever referred/recruited a member for our chapter? Yes No

10.) Who is someone you would recommend to join this organization? _____