

**XYZ 2009 Non-renewing Members Survey**

Dear member,

**Our records show that you have not renewed your membership with XYZ for the 2009 membership year. We are very interested to incorporate your feedback and suggestions to improve XYZ services and benefits. Please mail or fax back your completed survey to Perception Solutions (2472 Wentworth Lane, Aurora, IL 60504 Phone (630) 692-1427; Fax (630) 692-1428. Thank you for your participation.**

<b>About You</b>	
1	<p>What is your professional area of expertise? (please choose)</p> <p><input type="checkbox"/> Registered Nurse (RN)</p> <p><input type="checkbox"/> Registered Technician</p> <p><input type="checkbox"/> Registered Pharmacist (RPh)</p> <p><input type="checkbox"/> Other: (please specify _____)</p>
2	<p>How long were you an XYZ member? (please write in) _____ yrs.</p>
3	<p>How long have you been in practice? (please write in) _____ yrs.</p>
4	<p>What is your practice setting (where you spend the majority of your time providing diabetes education)? (please choose)</p> <p><input type="checkbox"/> Hospital</p> <p><input type="checkbox"/> Integrated delivery network</p> <p><input type="checkbox"/> Multi-specialty group</p> <p><input type="checkbox"/> University medical school</p> <p><input type="checkbox"/> Consulting</p> <p><input type="checkbox"/> Other: (please specify _____)</p>
5	<p>Who pays for your XYZ membership dues?</p> <p><input type="checkbox"/> My employer pays 100%</p> <p><input type="checkbox"/> My employer pays __%, I pay __%</p> <p><input type="checkbox"/> I pay 100%</p>
<b>Your XYZ Membership</b>	
6	<p>Please indicate three top reason(s) for not renewing your membership (select only three choices).</p> <p><input type="checkbox"/> I thought I had renewed</p> <p><input type="checkbox"/> Did not know how to renew</p> <p><input type="checkbox"/> Too expensive (can not pay out-of pocket)</p> <p><input type="checkbox"/> Too expensive (my institution will not support)</p> <p><input type="checkbox"/> I share benefits with other colleagues</p> <p><input type="checkbox"/> No longer employed in this specialty</p> <p><input type="checkbox"/> Retired</p> <p><input type="checkbox"/> Only join for Annual Meeting</p> <p><input type="checkbox"/> Disagree with XYZ's policies</p> <p><input type="checkbox"/> No value (programs, services, etc. do not meet my needs)</p> <p><input type="checkbox"/> No time to participate</p> <p><input type="checkbox"/> Other: _____</p>
7	<p>What could XYZ do to help you to renew your membership (please select all that apply).</p> <p><input type="checkbox"/> Produce a brochure I can share with my employer that outlines benefits of membership.</p> <p><input type="checkbox"/> Establish an awards program similar to frequent flyer programs.</p> <p><input type="checkbox"/> Provide group membership</p> <p><input type="checkbox"/> An option to pay dues in installments</p> <p><input type="checkbox"/> Offer a three-month trial membership</p> <p><input type="checkbox"/> Other: _____</p>

**XYZ 2009 Non-renewing Members Survey**

<b>XYZ Products &amp; Services</b>					
	<i>The following questions concern your awareness and use of various XYZ products and services. Which response most appropriately describes your use of the product or service:</i>	I was not aware it was available from XYZ	I was aware it was available from XYZ but did not use it	I have used it and did not find it valuable	I have used it and have found it to be valuable
8	<p><b>To improve your job effectiveness:</b></p> <p style="padding-left: 40px;">The Journal</p> <p style="padding-left: 40px;">XYZ FYI Newsletter</p> <p style="padding-left: 40px;">Specialty Practice Groups</p> <p style="padding-left: 40px;">Audiotapes/Videos/Books</p> <p style="padding-left: 40px;">Networking at national level</p>	_____	_____	_____	_____
9	<p><b>To advance the cause:</b></p> <p style="padding-left: 40px;">Raise awareness of the role of educators</p> <p style="padding-left: 40px;">Support passage of a Medicare Reimbursement Bill</p> <p style="padding-left: 40px;">Identify and support legislative and regulatory initiatives in 50 states</p> <p style="padding-left: 40px;">Legislative updates</p>	_____	_____	_____	_____
10	<p><b>To build XYZ professional stature:</b></p> <p style="padding-left: 40px;">Referral service</p> <p style="padding-left: 40px;">Representation at related meetings and exhibitions</p> <p style="padding-left: 40px;">Directory of members</p> <p style="padding-left: 40px;">National XYZ Education Week</p> <p style="padding-left: 40px;">Recognition Awards</p>	_____	_____	_____	_____
11	<p><b>To sharpen XYZ professional edge</b></p> <p style="padding-left: 40px;">XYZ Forum</p> <p style="padding-left: 40px;">Research Grants</p> <p style="padding-left: 40px;">Searchable Research Database of educational and behavioral research studies</p> <p style="padding-left: 40px;">Position statement and Standards of Practice Education and Care</p>	_____	_____	_____	_____
12	<p><b>XYZ Networking and Community:</b></p> <p style="padding-left: 40px;">Awards, Grants &amp; scholarship</p> <p style="padding-left: 40px;">XYZ's website with discussion groups</p> <p style="padding-left: 40px;">Networking</p> <p style="padding-left: 40px;">Chapters</p>	_____	_____	_____	_____

**XYZ 2009 Non-renewing Members Survey**

<b>XYZ Value of Membership</b>									
	<i>Please rate the following:</i>	Excellent	Very Good	Good	Fair	Poor	N/A		
13	The degree to which XYZ provides you with tools and resources to promote your growth within your organization	—	—	—	—	—	—		
14	The degree to which XYZ membership is essential to your career success	—	—	—	—	—	—		
15	The degree to which XYZ is the recognized voice of your profession	—	—	—	—	—	—		
<b>Other Memberships</b>									
16	Are you a member of the following professional societies, and if so how would you compare XYZ services?	CEs	Advocacy	Recognition	Networking	Publications	Annual Meeting	Career Advancement	Other Benefits
17	<b>Other Associations</b>	—	—	—	—	—	—	—	—
	XYZ is better	—	—	—	—	—	—	—	—
	Same	—	—	—	—	—	—	—	—
	XYZ is worse	—	—	—	—	—	—	—	—
<b>Overall Satisfaction</b>									
	<i>How would you rate:</i>	Excellent	Very Good	Good	Fair	Poor	N/A		
18	The value of membership services in return for the dues paid	—	—	—	—	—	—		
19	Overall, how satisfied were you with your XYZ membership?	—	—	—	—	—	—		
20	The likelihood that you would recommend XYZ membership to your peers.	—	—	—	—	—	—		

21. What is the one thing XYZ could do to entice you to become a member again? \_\_\_\_\_

\_\_\_\_\_

22. Please suggest ideas for future enhancement of benefits and services: \_\_\_\_\_

\_\_\_\_\_

Thank you for completing this survey. Please mail or fax back your completed survey to:  
**Perception Solutions (2472 Wentworth Lane, Aurora, IL 60504 Phone (630) 692-1427; Fax (630) 692-1428).**