



## CNPS Chapter Survey

Thank you taking the time to complete this questionnaire and for your commitment to improving our chapter. The Board looks forward to hearing from everyone! Responses are confidential.

I am a:      Guest \_\_\_\_\_      New Member \_\_\_\_\_      Member \_\_\_\_\_

### Meetings:

What is the main reason you attend meetings or joined FNPS? \_\_\_\_\_

How did you hear about the Citrus Chapter? \_\_\_\_\_

Is the meeting time/place acceptable?   ☐ Yes   ☐ No   If no, what would be better? \_\_\_\_\_

The length of the meeting is:      ☐ Adequate      ☐ Excessive      ☐ Insufficient

Is the meeting:   ☐ Well Organized      ☐ Poorly Organized – I'd change: \_\_\_\_\_

What parts of the meeting do you like? (*mark all that apply*)   ☐ Socializing      ☐ Barb's Bits      ☐ Refreshments  
☐ Area events      ☐ Plant Of The Month      ☐ Chapter Business      ☐ Speaker      ☐ Raffle

The following changes would improve the meetings:

- |                                                              |                                                      |                                           |
|--------------------------------------------------------------|------------------------------------------------------|-------------------------------------------|
| <input type="checkbox"/> Better Speakers                     | <input type="checkbox"/> More Focus On Fellowship    | <input type="checkbox"/> No change needed |
| <input type="checkbox"/> Increased Variety Of Program Topics | <input type="checkbox"/> More Environmental Concerns |                                           |
| <input type="checkbox"/> Better Time Management              | <input type="checkbox"/> More Children's Activities  | <input type="checkbox"/> Other: _____     |

### Activities:

Have you participated in our field trips or activities?   ☐ Yes      ☐ No

Native plant walks:      ☐ More      ☐ Same      ☐ Less

Field trips (nurseries, festivals, etc):      ☐ More      ☐ Same      ☐ Less

Service projects organized:      ☐ More      ☐ Same      ☐ Less

How long of a trip can you participate in?      ☐ 1 hr      ☐ 2 hr      ☐ 3 hr      ☐ 4 hr +

How far would you potentially be willing to travel?      ☐ 20 miles      ☐ 50 miles      ☐ 75 miles      ☐ 100 miles

What days are better?      ☐ Mon      ☐ Tue      ☐ Wed      ☐ Thur      ☐ Fri      ☐ Sat      ☐ Sun      ☐ Any day

### Participation:

Do you have a skill, talent or interest that you could share? \_\_\_\_\_  
(*e.g.: botanist, Master Gardener, accounting, computer skills, artist, organizing, patience, CPR certification*)

**The success of the Chapter depends on you!** Please indicate areas where you may be able to assist, or like to learn.

- |                                                   |                                              |                                               |                                          |
|---------------------------------------------------|----------------------------------------------|-----------------------------------------------|------------------------------------------|
| <input type="checkbox"/> Membership development   | <input type="checkbox"/> Email assistant     | <input type="checkbox"/> Data Entry           | <input type="checkbox"/> Outing Leader   |
| <input type="checkbox"/> Publicity                | <input type="checkbox"/> CNPS Website        | <input type="checkbox"/> Graphic Design       | <input type="checkbox"/> Project Leader  |
| <input type="checkbox"/> Meeting setup/take-down  | <input type="checkbox"/> CNPS Facebook       | <input type="checkbox"/> Making phone calls   | <input type="checkbox"/> Public Speaking |
| <input type="checkbox"/> Refreshments             | <input type="checkbox"/> Newsletter          | <input type="checkbox"/> Event Coordination   | <input type="checkbox"/> Activism        |
| <input type="checkbox"/> Bring plants to meetings | <input type="checkbox"/> Booth volunteer     | <input type="checkbox"/> Program Coordination | <input type="checkbox"/> Legislation     |
| <input type="checkbox"/> Preserve Workdays        | <input type="checkbox"/> Children's Outreach | <input type="checkbox"/> Chapter Historian    | <input type="checkbox"/> Conservation    |
| <input type="checkbox"/> Tree Planting            | <input type="checkbox"/> Plant Sales         | <input type="checkbox"/> Fund-raising         | <input type="checkbox"/> Board Position  |

YES! I want to help the Chapter become stronger. Please contact me about the activities above.

Name \_\_\_\_\_ Phone \_\_\_\_\_ City \_\_\_\_\_

◆◆◆ We would love to hear about speakers or outings that you recommend. Please share those ideas, ◆◆◆  
and any suggestions, comments, or things you think we should no longer do, on the back of this page.