



QUICK MEMBERSHIP SURVEY

Please Return This With Your Renewal Application & Dues!

1. What is your role at your nonprofit?

- Board Member
- Volunteer
- Chief Staff Person (ED,CEO)
- Management
- Finance
- Program Staff

- Advocacy Issues
- Board Development Issues
- Collaboration
- Communications/Marketing
- Evaluating Your Results
- Financial Crisis
- Financial Management – Cash Flow Issues
- Financial Sustainability
- Fundraising
- Managing Growth
- Rising Demand for Programs
- Staff/HR Issues
- Strategic Planning
- Technology
- Other:

2. What is your organization’s current fiscal year operating budget?

- Under \$50,000
- \$50,000 to \$499,999
- \$500,000 to \$999,999
- \$1,000,000 to \$4,999,999
- Over \$5,000,000

3. What do you think are the two most significant challenges facing nonprofits today?

4. Were you **aware of or did you engage** in any of the following NYCON Members Only Programs in 2010?

a. **Group Purchasing Programs**

(Staples, ReadyTalk, Payroll, Free Color Printer Program, etc.)

- Aware of
- Engaged in

b. **Technical Assistance Programs**

(Individual Consulting on Board Governance, Strategic Planning, Financial Mgmt, Fund Development, Legal Assistance, Etc.)

- Aware of
- Engaged in

c. **Employee Benefits Programs**

(Health, Dental, Life, Flexible Spending, Workers Comp, Unemployment, etc.)

- Aware of
- Engaged in

d. **Organizational Insurance Programs** *(Directors & Officers Insurance, General Liability, Fiduciary Liability, etc.)*

- Aware of
- Engaged in

e. **Free Phone Assistance**

(General phone assistance on nonprofit business matters)

- Aware of
- Engaged in

5. What would make NYCON Membership more valuable to your organization?

- Additional Group Purchasing Programs for: _____.
- Additional Educational Opportunities, including CEUs
- High Profile Advocacy on Behalf of All Nonprofits
- More Accessible/Affordable Technical Assistance
- More nonprofit specific information via email newsletter and website
- Tools, templates and other resources online
- Other: _____.

6. We want you to feel good about your experience with NYCON. Please rate your experience(s) with us:

- | | | | | |
|-----------------------------------------|------------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> Responsiveness | <input type="checkbox"/> Excellent | <input type="checkbox"/> Good | <input type="checkbox"/> Fair | <input type="checkbox"/> Poor |
| <input type="checkbox"/> Helpfulness | <input type="checkbox"/> Excellent | <input type="checkbox"/> Good | <input type="checkbox"/> Fair | <input type="checkbox"/> Poor |

7. Is there anything else you would like to tell us?

**Please Return this Survey with Your
Renewal Application & Membership Dues Payment to:**

NYCON, Inc.

c/o Membership Department

272 Broadway, Albany NY, 12204

Or Fax to: (518) 434-0392 if you choose to renew online.