# **12. Sample Member Interest Surveys**

#### (Sample 1) LWV OF XXX Member Profile

The LWV of XXX is so glad you have joined us to help make democracy work in our community and our country! We would love to learn more about you to make your time with the League the best it can be. Please complete and submit this form to let us know about your interests and what you would most like to get out of your League membership. We look forward to making a difference with you. Welcome!

Name: Address: Phone: Email:

Employed: Full Time\_\_\_\_ Part Time\_\_\_\_ Retired\_\_\_\_\_

First Joined League:

I would like to be considered: Active

Inactive Member/Supporter

What are your special skills/talents/interests that you would like to share with League?

As a grassroots organization, the League depends upon the work of its members to carry on its program. We ask that active members volunteer at least a few hours per year in the ORGANIZATION, PROGRAM, or VOTER SERVICE activities of your choice.

*Please indicate your interest(s) below.* 

LEAGUE ORGANIZATION
Assisting with League Events/Meetings: One Time: \_\_\_\_ Ongoing: \_\_\_\_

Communications (Speaker, Moderator, Media Liaison): One Time: \_\_\_\_ Ongoing:

Finance/Development (Finance Drive, Special Fundraising Events):

Mailing Newsletter (Monthly): One Time: \_ Ongoing: \_Membership: \_

Serving on the LWV YOUR LEAGUE Board (Officer/Director): \_

PROGRAM (ISSUES FOR STUDY/ACTION) AS DETERMINED BY MEMBERS (List Here)

1.

2.

2. 3.

3. 4



## **Guaranteeing Access to Health Care**

Reproductive Rights\_ Uninsured/Under-Served \_ Health Promotion \_ Insuring the Safety of Our Residents\_ Domestic Violence\_ Gun Control\_

#### **VOTER SERVICE**

Special Voter Service Projects \_ Candidate Forums/Debates/Meetings\_ County Fair\_ Farm Festival\_ Publications\_ Voter Registration Activities\_

Fold Here-----



League of Women Voters of [TOWN] c/o [NAME] STREET CITY, STATE ZIPCODE



### (Sample 2)

Please take a few minutes to fill out this form.

Your participation will help to keep our League vital – and you'll find that League is more interesting when you're involved. As you see, time commitments can be brief, moderate, or lasting, so we hope you'll let us know what you would like to do.

## Name:

Street Address: City, State, Zip: Telephone (home): Telephone (work): Cell Phone: E-Mail Address:

# Please check the following ways you would be willing to participate in the League this year:

- □ Attend monthly meetings (League program presented)
- $\hfill\square$  Make telephone calls for meetings and other activities
- $\Box$  Committee member (Circle ones of interest)
  - Natural Resources Judicial Land Use Government/Election Law International Issues Health Care Social Policy Women's Issues
- $\square$  Board member (position)
- □ A participant in a study this year or next (topic/area)
- □ Letter writing to our representatives and elected officials
- $\Box$  Voters service
- $\Box$  Refreshments for meetings
- $\Box$  Donate home for meetings

 $\Box$  May be available to help with a specific activity (For example, for voter registration drive, new member orientation, holiday party, annual meeting, fundraiser, etc.)

- $\Box$  Mentor for new members
- □ Recruit new members
- $\Box$  Finance drive

# What special skills or experience can you bring to League?

Do you know someone (a friend, acquaintance, relative) who would like to join our League? Please include the individuals' name, phone number and email address.

Please return this completed form to Membership Chair NAME/ADDRESS