Branch Membership Questionnaire

Please mail, fax or scan this survey to the ICF Membership Committee, ATTN: Nina Malone.

Mail: 8393 Capwell Drive, Suite 110, Oakland CA 94621      Fax: (510) 633-9758      email: membership@icf.org

Does your branch have a Membership Chairperson?  _____ Yes  (Name) _______________________  _____ No

Is a Membership Report given at each meeting?    _____ Yes  _____ No

When was your last Membership Drive?  ______________________________________________________

When is your next Membership Drive?  _______________________________________________________

Please check the techniques that your branch uses to promote membership:

_____ Church Bulletin Ads    _____ Parish Directory    _____ Pulpit Announcements

_____ Parish website    _____ Branch Website    _____ Local City Website

_____ Membership Info Board    _____ ICF Posters    _____ ICF Brochures

_____ Parish Organization Fairs    _____ Signup Table After Mass    _____ Signup Table at Events

_____ Diocesan Newspaper    _____ Local Newspaper    _____ School Newspaper

_____ Parish Festivals    _____ Local Area Festivals    _____ Social Media

_____ Church Bulletin Ad – ICF not yet establish in parish    _____ Invites to Family/Friends

_____ Invites to Religious Ed and Catholic School Families    _____ Invites to RCIA participants

_____ Wear ICF Gear (nametags, shirts, hats, jackets, aprons)    _____ Other, please share:

__________________________________________________________________________________________

Please share the reasons outgoing members have given for canceling their membership: __________________

__________________________________________________________________________________________

What attempts are made to follow up with past due members?

_____ Phone calls    _____ Reminder notice    _____ E-mail

_____ Other, please share: __________________________

Please describe the member appreciation activities that your branch offers: _________________________

__________________________________________________________________________________________

What type of family friendly events and/or programs does your branch have available?  ______________

__________________________________________________________________________________________

Comments/Suggestions:

Contact Person (Print) Name: ____________________________  Branch # ______  City ______________________

Thank you for your participation.