

# Nonprofit Organization Member Feedback Template

Thank you for being a valued member of our organization. Your feedback is essential to helping us grow, improve our programs, and better serve our community. Please take a few minutes to fill out this feedback form.

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## 1. General Information

Member Name:

Email Address:

Date of Feedback:

How long have you been a member?:

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## 2. Member Experience

What is your primary reason for being a member of our organization?

What do you value most about your membership?

How would you rate your overall satisfaction with your membership? (e.g., Very Satisfied, Neutral, Dissatisfied)

## 3. Programs and Community Impact

Which of our programs or events have you participated in recently?

What impact do you feel our organization is making in the community?

What new programs, events, or resources would you like us to offer in the future?

## 4. Communication and Engagement

How do you prefer to receive updates and news from us? (e.g., Email, Social Media, Newsletter)

Do you feel your voice and ideas are heard by the leadership team? (Yes / No / Comments)

Would you be interested in volunteering or taking on a leadership role? (If yes, please specify your area of interest)

## 5. Areas for Improvement

What is one thing we could do to improve your experience as a member?

Please share any other comments, questions, or suggestions below:

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Thank you for your time, dedication, and support of our mission!