ECA MEMBER EXIT SURVEY

No. of Years as a Member

Company Name: ____________________________
Representative Name: ____________________________ Date: ____________

How often would you say you used our services?

☐ Weekly  ☐ Monthly  ☐ Annually  ☐ Never  ☐ Not Sure

What was the reason for joining the ECA? Please, check all that apply:

☐ Assistance with IR issues  ☐ Training Services  ☐ Assistance in HR
☐ To be part of a membership/professional organization
☐ Employer Representation at national, regional and international level
☐ Other

What is the reason for cancelling your membership? Please, check all that apply:

☐ Unsatisfactory Service
☐ Staff members not helpful
☐ Financial Reasons
☐ Merger/Acquisition
☐ Closure of Business
☐ No Longer Interested
☐ Not satisfied with member Benefits
☐ Membership Fees to Costly
☐ Other

Other comments:

Can you make any suggestions for how we can improve the ECA and/or the Membership Experience?