

## Prospects to Profits Membership Program Survey

Your Name: \_\_\_\_\_

1. What level membership do you currently have?

Trial \_\_\_\_ Bronze \_\_\_\_ Silver \_\_\_\_ Gold \_\_\_\_ Platinum \_\_\_\_

2. What business or niche market are you in?

\_\_\_\_\_

3. Are you reading all of the material available to you in your membership level?

Yes \_\_\_\_ No \_\_\_\_

4. Do you find the material helpful and informative?

Yes \_\_\_\_ No \_\_\_\_

5. What other material would you like to see in the membership area?

Example, articles on a particular topic, more samples etc.

\_\_\_\_\_

6. What other interviews would you like to see us have?

\_\_\_\_\_

7. What do you like best about the program?

\_\_\_\_\_

8. What do you like least about the program?

\_\_\_\_\_

9. Have you found AMS representatives helpful? Yes \_\_\_\_ No \_\_\_\_

10. Do you find the program easy to implement? Yes \_\_\_\_ No \_\_\_\_