

# INSIGHTS Newsletter Reader Survey – July 2015

The Center for Vision Loss wants to know your opinions, suggestions and comments regarding this newsletter and the activities we offer! Check your answers and return the completed survey in the enclosed envelope. Or you may call Raquel @ 610-433-6018 to complete as a phone survey. Your response is anonymous. Thank you.

**1. Do you usually read the newsletter?**

☐ Yes   ☐ No   ☐ Sometimes

**2. What do you think of our newsletter? Please check the best answer.**

☐ I like the newsletter the way it is now.

If you check this box, **move to question # 3**

☐ I do not like the newsletter because....check all that apply

☐ The new layout is confusing

☐ I think the text is too hard to read

☐ Not enough information about activities

☐ The calendar pages are crowded

☐ I can't find the information I want

☐ I liked the old layout better

**3. What would make the newsletter MORE interesting to you?**

☐ Add vision related articles

☐ Add help and suggestion column

☐ Add human interest stories

☐ Other \_\_\_\_\_

**4. How often do you attend Center for Vision Loss activities?**

☐ Monthly

☐ Occasionally

☐ Rarely

**5. What new activities would you participate in if offered?**

---

---

**6. How do you receive your newsletter?**

☐ Large Print

☐ Braille

☐ In Email

☐ Digital/ audio

**7. How do you learn about upcoming events and CVL activities?**

☐ Newsletter

☐ Online

☐ Caseworker

☐ Other

**8. Who is completing this survey?**

☐ I am

☐ Caregiver

☐ Professional

☐ Relative

☐ Other

**THANK YOU FOR TAKING THE TIME TO COMPLETE THIS SURVEY!!**