



We're Listening!

We value you as a Member and we'd like to know how we can serve you better. Please take a moment to answer these few questions. Your help is greatly appreciated. *(Please select choice)*

Date ____/____/____

Time: Morning Afternoon Evening

Where did we serve you?

Approximate Wait Time: _____

Reason for Visit: Deposit Withdrawal
Payment Cash Check Open Account
Apply for Loan Loan Closing
Other _____

Who Helped You: _____

Quality of Service:

Awesome Good
Just Okay Disappointing

Comments and Suggestions:

Please update your contact information:

Name: _____

Address: _____

Cell# _____ Home# _____

Email: _____

Please send completed form to INFO@SouthJerseyFCU.com