

ACDDA Membership Survey:

(Circle One)

Are you a general dentist or a specialist? G S

Are you male or female? M F

How many years have you been practicing? _____

What kind of programs would you like to see at ACDDA?

Are you involved in?

Children's Dental Health Month Give Kids A Smile Dentist's Day on The Hill

Do you attend the ACDDA Annual Winter Meeting?

Never Regularly Sometimes Often

What types of speakers would you like to see at the ACDDA Annual Winter Meeting? _____

Do you prefer clinical speakers or a wider range of topics (Practice Management, non-clinical, finances, etc)? Y N

Do you voice your opinion by voting at the general membership meeting on items such as officers, budget, bylaws, etc? Y N

Do you know how much your ACDDA dues are? Y N

Do you know how much your Tripartite dues are? Y N

What do you feel is the most important membership benefit of belonging to the Tripartite – ADA, FDA, ACDDA?

Peer Review Political Advocacy Publications Legal CE OTHER

Is the ACDDA visible enough and are we available to answer your questions or needs?

NOT AT ALL 1 2 3 4 5 6 7 8 9 10 VERY

Do you belong to your local affiliate dental association ex. – Broward County, Central Palm Beach County, North Palm Beach County, South Palm Beach County, Treasure Coast Dental Society? Why or why not? Y N

Are you or have you been involved in leadership? Y N

If so for how long? **1-5 yrs.** **5-10 yrs.** **10-20 yrs.** **20+ yrs.**
if not why? _____

Have you been asked to be involved in leadership at any level? Y N

Do you read the ACDDA Explorer Newsletter? Y N

Do you read the membership e-mail blasts from ACDDA? Y N

How important is it for organized dentistry to have a strong legislative presence?

Not Important 1 2 3 4 5 6 7 8 9 10 Very Important

Do you purchase insurance from FDAS? Y N

Do you think the insurance available has value? Y N

If you are not renewing your dues, was it cost related? Y N

What do you expect in return for paying your dues?

What can we do to attract younger members out of dental school?

What is the most current and prominent obstacle in your private practice today?

Finances Economic conditions Staffing issues Legislative issues Other

What is your opinion on the Florida Licensure Examination? _____

Is a larger association a stronger association? Y N

What can we do better?

Name (optional) _____

Contact Info (optional) _____

Do you wish to be contacted? Y N

Fax to 561-968-5842

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