



ROSWELL PARK
CANCER INSTITUTE

The Ride For Roswell 2008 Volunteer Survey

Please complete the below survey and return to The Ride For Roswell at the address listed below. This survey is also available online at www.RideForRoswell.org.

Please help us keep our records current by providing the following contact information.

Name: _____ Phone/Fax: _____
Address: _____ City, State, & Zip: _____
E-mail address: _____ Cell: _____
Company: _____ Team (If applicable): _____

1. What is your relationship to Roswell Park Cancer Institute? (Check all that apply.)

- Patient/Survivor: Roswell Friend or family of current or previous patient /survivor Roswell employee
 Patient/Survivor: Other Hospital Roswell volunteer No personal connection Other: _____

2. How did you hear about The Ride For Roswell? (Check all that apply.)

- Family or Friend Radio: _____ (station) TV: _____ (station) Newspaper ad/story: _____ (station)
 Bus Ad Billboard Ride Website Other Website: _____ (site) Ride Email Facebook Ad RideConnect.org
 Other social networking site (MySpace, LinkedIn) Through Roswell Park Employer/Organization (name): _____
 Brochure/poster display in the community – Where: _____ Other: _____

3. Please rate your volunteer experience at The Ride For Roswell:

- Very enjoyable Enjoyable Average Below average Poor

4. How has your impression of Roswell Park Cancer Institute been affected as a result of The Ride For Roswell?

- Much more favorable More favorable No change Less favorable

5. Do you participate primarily to support Roswell Park Cancer Institute or for the experience of the sporting event? (Select one)

- To support Roswell Park Cancer Institute For the experience of the sporting event Other: _____

6. What was your volunteer job at The Ride For Roswell?

- Route Guide Riding Marshall Fire/Police Rest Stop Server SAG Vehicle Ham Operator
 Registration T-Shirt Distribution Food Set-up/Server Parking Other: _____

About Your Location: (For Route Guides Only) Route Assignment: _____ Location (corner): _____
First rider's arrival time: _____ Bulk of riders arrival time: _____ Last rider's arrival time: _____

7. How many years have you volunteered for The Ride For Roswell? _____ (Recognition at the Volunteer Appreciation Party)

8. Do you fundraise as a virtual rider or donate to a rider? A Virtual Rider Donated to a rider Neither

9. Where do you prefer to get updated information about The Ride For Roswell?

- Ride website Ride email messages Calling the Ride office Rider & Fundraising Guides by mail
 Ride newsletters by mail Ride Connect at pre-Ride events (Rally, Orientation, Kick-Off, and Pledge Party)

10. Did you attend a Volunteer Orientation and if not what type of information would better prepare you to volunteer on Ride day?

11. Share your comments & suggestions on how your volunteer experience can be improved at the Ride (specific comments to your position)?

12. Can you recommend a volunteer for next year's Ride to us?

Volunteer Name: _____ Phone/Fax: _____
Address: _____ City, State, & Zip: _____
E-mail address: _____ Cell: _____

Yes, I want to be a part of next year's Ride For Roswell. Please send me information (check all that apply):

- Volunteer Opportunities Planning Committee Sponsorship/Underwriting Becoming a Team Captain

SEND US YOUR STORIES! We want to hear why you choose to volunteer. Please use the back of this page.

Thank you for taking time to fill out this brief survey and help us to improve the Ride for next year's.

The Ride For Roswell

www.RideForRoswell.org or visit our social networking site at www.RideConnect.org

Roswell Park Cancer Institute: Elm and Carlton Street, Buffalo, NY 14263

Phone: 716-THE-RIDE (843-7433) * Fax: 616-845-8705 * RideForRoswell@roswellpark.org