



# DEVON BANK

## Questionnaire

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

\*Gender: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

\*Ethnicity: \_\_\_\_\_

Phone: \_\_\_\_\_

### Please take this short survey to help us get to know you better:

1. How did you hear about Devon Bank?

\_\_\_\_\_

2 What is your preferred language?

\_\_\_\_\_

3. Please provide your email address: \_\_\_\_\_

In addition to email, would you like to be contacted by phone or standard mail?

Phone

Standard Mail

Text Message

4. Do you have children over the age of 18?

Yes

No

5. Are you a homeowner ?  Yes  No

If not, do you plan to purchase a home in the near future?  Yes  No

6. Are you a business owner ?  Yes  No

If yes, what type of business do you own? \_\_\_\_\_

**\*Optional**