



MARKETING SURVEY FORM

Center ID: _____

Date of Launch: _____
(mm/dd/yyyy)

Center Name: _____

1. **EXACT Business Address** : _____

2. **BUSINESS ENVIRONMENT** (Check appropriate space)

Primary

Secondary

- () Residential
- () Commercial
- () Mall
- () Educational
- () Others

- () Residential
- () Commercial
- () Mall
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- () Others

Specify _____

Specify _____

3. **POTENTIAL BUSINESS SOURCES**

3.1 Households (Within 50 m. radius)

Subdivision Community	% w/Children 12below

3.1 **Households** (Outside 50 m. radius)

Subdivision Community	% w/Children 12below

3.2 RECREATIONAL AREAS (movie houses, gyms, restaurants, etc.)

Name	No. of Patrons	Frequency of Visit (regular, irregular)

3.3 CHURCHES

Name	No. of Church Goers	Day/s of Services

3.4 ASSOCIATION (other than homeowners)

Name	Principal Activities	No. of Members

3.5 OTHER SOURCES OF STUDENTS

Sources	Potential

4. SPECIAL EVENTS (Holidays, Special Events, Mall Sale, Community Gatherings)

Events	Date

5. MAJOR COMPETITORS

Name	Distance (to your center)	# of students	Marketing Activities

5.1 What are some of the successful promotional activities that your competitor has launched in the past?

1. _____
2. _____
3. _____
4. _____
5. _____

5.2 List your primary advantages over your competitors.

1. _____
2. _____
3. _____
4. _____
5. _____

5.3 List the advantages your competitors have over you.

1. _____
2. _____
3. _____
4. _____
5. _____

5.6 What advertising and promotional tools would you need? Be specific.

1. _____
2. _____
3. _____
4. _____
5. _____

What would you say is/are your greatest area/s of opportunity?

1. _____
2. _____
3. _____

What would you say is/are your biggest problems?

(As in location, students, recruitment, personnel, etc.)

1. _____
2. _____
3. _____