Your Member Experience

We want to hear from YOU, our valued members!

Why do you want my feedback?
• Enhance your member experience
• Improve member satisfaction
• Make improvements based on your feedback
• Recognize outstanding service

How do I give feedback?
• Complete this form and give to any branch associate or mail to: Visions Federal Credit Union
  Att: Member Experience Liaison
  24 McKinley Ave • Endicott, NY 13760
• Log into your Visions online banking account and click on “message center” in the upper right corner
• Log into the Visions mobile app and click on “messages” under “general info” in the menu area and click on “new” to create a message

Please note: All feedback forms and their contents become property of Visions Federal Credit Union.

What is the process?
Your compliments will be forwarded to management and the associates will be recognized, if applicable. All feedback will be considered. If you have requested a response, we aim to acknowledge your feedback within 10 business days of receipt.

Type of feedback:
[ ] Compliment  [ ] Suggestion  [ ] Complaint  [ ] Other

Your preferred contact method:
[ ] Email  [ ] Phone  [ ] Mail  [ ] No reply necessary

Associate Name: _______________________________
Branch/Department Involved: ____________________

Name: _______________________________________
Phone: ____________________________ Date: _________
Address: _____________________________________
Email: _______________________________________
Account Number: ____________________________
At Visions, our goal is to aim for exceptional member service at every interaction.

Feedback: